



Village of Hoffman Estates

1900 Hassell Road
Hoffman Estates, IL 60169

Phone: 847-781-2631
www.hoffmanestates.org/permits
BuildingPermits@vohe.org

Village Use Only	
Bus ID #:	
License #:	

2024 Contractor License Application

Annual fee: **\$100.00** Valid 5/1/24 – 4/30/25 Fee
beginning 11/1/24: \$50.00

*** FEE MUST BE SUBMITTED AT TIME OF APPLICATION ***

State Regulated Contractors:	Copy of state license required.
Electrical Contractors:	Copy of Electrical License from approved testing agency or Village of Hoffman Estates Contractor License (Building Official Approval required), and Bond & Insurance required.
All Other Contractors:	Village of Hoffman Estates Contractor License, Bond & Insurance required.

BOND REQUIREMENTS:	\$10,000 Surety – if Principal listed, must be signed.
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<p>INSURANCE CERTIFICATE REQUIREMENTS:</p> <ul style="list-style-type: none"> ▶ Comprehensive General Liability: Minimum aggregate of \$300,000; One person \$100,000 per occurrence ▶ Worker's Compensation: Illinois Statutory Limits box MUST be checked, or submit Village's signed affidavit attesting "No Employees." ▶ Village of Hoffman Estates, 1900 Hassell Road, Hoffman Estates, IL 60169 must be listed as Certificate Holder. <p>ADDITIONAL COVERAGE REQUIRED FOR <u>ALL</u> EXCAVATION or <u>ANY</u> WORK IN VILLAGE RIGHT-OF-WAY:</p> <ul style="list-style-type: none"> ▶ Proof of underground (XCU) Liability Insurance ▶ Automobile coverage as listed below: <ul style="list-style-type: none"> 1 ton or less: <ul style="list-style-type: none"> - \$250,000 per individual/\$500,000 per accident/\$250,000 property damage limits of personal auto coverage; or \$500,000 combined single limit of commercial auto coverage Over 1 ton: <ul style="list-style-type: none"> - \$1,000,000 combined single limit of commercial auto coverage

Print or type all responses.

_____ Name of Business Firm	_____ Contractor Type
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Street Address (P.O. Boxes are not acceptable)

_____ City	_____ State	_____ Zip Code
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Mailing Address (if different)

_____ City	_____ State	_____ Zip Code
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_____ () - Emergency Phone #	_____ () - Business Phone #
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_____ Owner Name	_____ Email Address
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The undersigned hereby certifies that they have the necessary experience, qualifications and equipment to properly engage in business and shall comply with all applicable regulations of the Village of Hoffman Estates and other agencies.

_____ Applicant Signature	_____ Date
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