

Kathy Catazaro-Perry, Mayor

Massillon

City of Champions

**CITY OF MASSILLON BUILDING DEPARTMENT
MUNICIPAL GOVERNMENT CENTER
ONE JAMES DUNCAN PLAZA, MASSILLON, OH 44646
PHONE: (330) 830-1724 * FAX: (330) 830-1782**

APPLICATION FOR MASSILLON CITY REGISTRATIONS

() General Contractor () Fire Suppression () Low Voltage

1. Owner of the Company's First & Last Name _____

2. Company Name _____

3. Company Address _____

City

State

Zip

3. Business Phone _____

4. FED I.D. # OR SS# _____

It is agreed that the applicant will conform with all rules, regulations and ordinances of the City of Massillon, Ohio, and that the allegations, representations and statements made in this application are true; and the applicant acknowledges that any falsification made on this form will void the application.

Signature of Applicant

Date Signed: _____, 20____

ALL REGISTRATIONS OR RENEWALS OF SAME SHALL EXPIRE AS STATED IN THE MASSILLON CITY ORDINANCES.