



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

Dear Applicant,

In answer to your inquiry, the City of Massillon requires all Home Improvement Contractors to be registered with the City of Massillon. To become registered as a Home Improvement Contractor, you will need to:

1. Fill out the Home Improvement Contractor's application in its entirety.
2. Submit the following items:
 - Completed application form.
 - Copies of other contractor registrations you have from other cities in Ohio.
If you are not registered in any other cities, you must schedule an interview with the Chief Building Official, Frank Silla. This informal interview can be done in person or over the phone and is simply meant to determine your construction knowledge before the application can be approved.
 - Copy of your driver's license or state identification card
 - Home Improvement Contractor's \$10,000.00 Surety Bond
We have our own bond forms and we must receive the original signed and sealed/stamp bond form.
 - Copy of your Worker's Compensation certificate, should you have employees.
3. The total amount needed to register the first time is \$225.00.
(This includes a \$75.00 application fee and a \$150.00 registration fee.)
4. Yearly registration is from March 1st of each calendar year through February 28th of the following calendar year. It does not matter what time of the year the registration is obtained, it will expire on the following February 28th. The cost is not pro-rated.
5. The registration belongs to the person who is listed on the application. If he/she leaves the company, the registration goes with him/her.
6. Permits are to be obtained before starting the job and it is your responsibility to call for all needed inspections.
7. It is your responsibility to renew your registration each year. We do not send out renewal notices. If your registration is not renewed by the end of the grace period, it becomes null and void, and this whole procedure must be repeated.

Should you have any questions concerning this matter, please feel free to call our office.

Massillon

City of Champions

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APPLICATION FOR CONTRACTOR REGISTRATION

- Electrical Contractor
- Heating Contractor
- Home Improvement Contractor
- Plumbing Contractor
- Fire Suppression Contractor
- General Contractor
- Low Voltage Contractor

1. Owner of Company First & Last Name _____

2. Company Name _____

3. Permanent Address _____

_____	_____	_____
City	State	Zip

3. Home Phone _____ U. S. Citizen? Yes or No

4. Date of Birth _____ FED I.D. # OR SS# _____

5. State of Ohio License? Y or N

6. State License Number _____ Expires _____

6. Business Name _____

7. Business Address _____

8. Business City, State & Zip _____

9. Business Phone _____

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____

FEES ARE NOT REFUNDABLE

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

CITY OF MASSILLON, OHIO

HOME IMPROVEMENT CONTRACTOR'S BOND

KNOW ALL MEN BY THESE PRESENTS, that _____
as principal, and _____
as surety, are held and firmly bound unto the City of Massillon or to any of its officers,
for the use of any person, persons, firm or corporation with whom such principal shall
contract to do home improvement work, in accordance with the provisions and
requirements of the Home Improvement Code of the City of Massillon, in the penal sum
of Ten Thousand Dollars (\$10,000.00), lawful money of the United States, for the
payment of which sum well and truly to be made, we bind ourselves, our heirs,
executors, administrators, successors and assigns, jointly and severally, firmly by these
presents.

Sealed with our seals and dated this _____.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH, that whereas
the above bonden, _____, has
made application to the Commissioner of Building for a Certificate of Registration as a
Home Improvement Contractor to engage in the business of Home Improvement
Contracting in Massillon during the year beginning _____ and
ending February 28, 20_____.

NOW THEREFORE, if the said _____ shall well
and truly indemnify, keep and save harmless the City of Massillon, or any of its agents
or officials for the use of any person, persons, firm or corporation with whom such
contractor shall contract to do work, and shall indemnify and pay any such person, firm
or corporation for damage sustained on account of the failure of such contractor to
perform the work so contracted for in accordance with the provisions of the Home
Improvement Code of Massillon, and any and all lawful rules and regulations
promulgated under the authority thereof, including Ordinance No. 1311, and from or by
reason or on account of anything done under and by virtue or any permits issued under
such registration for the doing of any work required to be done in the contracting of
buildings or other structures or any part of parts thereof, then this obligation shall be null
and void; otherwise to remain in full force and effect.

APPROVED:

Solicitor _____ Principal _____

Date _____ Surety _____

Attorney-in-fact

CITY OF MASSILLON
INCOME TAX DEPARTMENT
ONE JAMES DUNCAN PLAZA
PO BOX 910
MASSILLON, OHIO 44648-0910
Phone (330) 830-1709
Fax (330) 830-2687

BUSINESS AND PROFESSIONAL QUESTIONNAIRE

Please complete this questionnaire and return it to the Income Tax Department or mail to PO Box 910, Massillon, Ohio 44648-0910. Information provided will be used exclusively for income tax purposes and will not be further disclosed.

* 1. Name and Address of the business:

Name _____ DBA _____

Address _____ City/State/Zip +4 _____

City of Massillon Location Address (if applicable) _____

*2. Federal Employer ID or Social Security No: _____

3. Nature of business conducted: _____

4. Accounting method (check one): Calendar Year ending December 31. Fiscal Year ending _____

5. Do you now employ one or more persons? _____ If yes, how many? _____ If no, do you expect to have employees in the future? _____ If yes, how many? _____

6. Date that your business began operating within the City of Massillon _____ or started withholding _____

7. Type of ownership: Proprietorship S Corp C Corp Partnership Non-Profit Corp Other Specify _____

8. If the business is located outside of the City of Massillon, are you withholding income taxes as a courtesy for your employees? Yes No Date withholding started _____

9. Address to which tax forms, notifications and official correspondence are to be mailed:*

Business Name _____ To the attn. of _____

Address _____ City/State/Zip +4 _____

Phone Number (____) _____ - _____ Fax Number (____) _____ - _____

10. Check here if the business authorizes the City of Massillon Income Tax Department to contact directly the party in charge of the business's tax accounting.

11. Party in charge of tax accounting _____ Contact phone number (____) _____ - _____

Address _____ City/State/Zip _____

12. Please indicate below your preference for payroll forms:

_____ Withholding forms are needed, we prepare our own payroll.

Check one: _____ Please fax to: _____ or _____ Mail to above address*

_____ Withholding forms are not needed, we use a payroll service. Name of payroll service _____

Signature of individual completing form _____ Title _____

Printed Name _____ Date _____

*The Municipality's Building & Engineering Departments shall not issue any license or permit to any person, firm, partnership, association, corporation or other entity that does not possess a valid Certificate of Tax Registration in accordance with ORD 181.23.

*** IF YOU ARE A CONTRACTOR - PLEASE COMPLETE THE BACK SIDE OF THIS FORM ***

Codified Ordinances of the City of Massillon, Ohio, Section 181.23 REGISTRATION OF CONTRACTORS

(A) No person, firm, partnership, association, corporation or other entity shall perform any construction work within the City of Massillon without first obtaining a tax account number and a Certificate of Tax Registration from the City of Massillon Income Tax Department.

(B) A Certificate of Tax Registration shall be denied to any person, firm, partnership, association, corporation or other entity who is not current in the filing of required tax documents; who is not current in the required payment of taxes; or who has not complied with the provisions of this Chapter.

(C) The Income Tax Department shall maintain a list, and provide quarterly updated list to the City of Massillon Building and Engineering Departments, of the persons, firms, partnerships, associations, corporations and other entities holding valid Certificates of Tax Registration.

(D) The Municipality's Building and Engineering Departments shall not issue any license or permit required by Sections 913.01, 917.02, 917.13, 925.12, 925.13, 1301.1, 1311.03, 1313.06, 1313.07, 1313.15, 1317.06, 1317.07, 1317.18, 1321.04, 1321.08, 1341.02 and 1341.05 of the Codified Ordinances of the City of Massillon to any person, firm, partnership, association, corporation or other entity that does not possess a valid Certificate of Tax Registration.

(E) Failure to possess a valid Certificate of Tax Registration shall be cause for suspension of work by the Building Department, Engineering Department and/or the Income Tax Department prior to the construction work commencing and/or during the performance of the construction work. Proof of a valid Certificate of Tax Registration shall be necessary to commence or resume suspended construction work.

(F) A Certificate of Tax Registration may be canceled or revoked by the Income Tax Department for the failure of a person, firm, partnership, association, corporation or other entity to remain current in the required filing of tax documents; for failing to remain current on the required payment of taxes; and for failure to comply with the provisions of this Chapter.

(G) The word "construction" as used in this section shall mean any construction, reconstruction, rehabilitation, remodeling, improvement, enlargement, alteration, repair, painting, decorating, or landscaping performed within the limits of the City. (Ord.159-2015. Passed 11-16-15)

IF YOU ARE USING SUB-CONTRACTORS YOU MUST LIST THEM BELOW

1. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

2. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

3. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

4. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

5. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

6. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

7. Name _____ Fed ID or SSN _____ Phone # (____)_____-_____

Address _____

If more than seven sub-contractors are to be used, please attach additional sheet(s). Please notify the Income Tax Department of any additional or substituted sub-contractors that may be used.

I certify that I have read the section of the ordinance that pertains to the REGISTRATION OF CONTRACTORS and will lawfully comply with the ordinance of the City of Massillon. I also certify that I have disclosed all sub-contractors that will be used during construction.

Signature _____ Date _____ Title _____