



UPPER UWCHLAN TOWNSHIP

CONTRACTOR REGISTRATION APPLICATION

DATE: _____

STATE REGISTRATION # _____

Please check the type of contractor:

- General Contractor
- Electrical Contractor
- Mechanical Contractor
- Plumbing Contractor
- Other Contractor Type: _____
- Fire Protection Contractor
- Electrical Inspection Agency

I HEREBY MAKE APPLICATION FOR REGISTRATION

NEW

RENEWAL

(Please Print)

NAME OF CONTRACTOR: _____

NAME OF COMPANY: _____

MAILING ADDRESS: _____

CITY

STATE

ZIP

PHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL: _____

SIGNATURE OF APPLICANT

MAKE CHECKS PAYABLE TO:

UPPER UWCHLAN TOWNSHIP
140 POTTSTOWN PIKE
CHESTER SPRINGS, PA 19425
Phone: (610) 646-7001
Fax (610) 458-0307

REGISTRATION FEE:

\$ 50.00 Contractor Registration
\$150.00 Electrical Inspection Agency

IMPORTANT: Enclose a Certificate of Insurance showing your liability and workers' compensation limits that will cover you/your company for the entire year of **2026**. Coverage requirements are as follows:

Bodily injury & Property Damage Combined:

\$500,000 each occurrence
\$1,000,000 Aggregate

Contractual Liability-Bodily Injury & Property Damage Combined:

\$500,000 each occurrence
\$1,000,000 Aggregate

Business Auto Liability:

\$500,000 each person
\$500,000 each occurrence
Property Damage \$500,000

Umbrella Excess Liability:

\$1,000,000 over primary insurance
\$1,000,000 per occurrence
\$1,000,000 annual aggregate