



CITY OF TOLEDO

Department of Inspection - Division of Building Inspection
One Government Center, Suite 1600 • Toledo, OH 43604 • Phone (419) 245-1220 • Fax (419) 245-1329
onestopshop@toledo.oh.gov

CONTRACTOR REGISTRATION APPLICATION

Applying for: Electrical Contractor General HVAC Contractor Plumbing Contractor
 Electrical Contractor Residential Refrigeration Contractor Hydronics Contractor

Applicant Information

Applicant's Name (First Name, Middle Initial, Last Name, Suffix)

Social Security No.

() -

Applicant's Street Address (Home)

Telephone No.

City, State, Zip

E-mail Address

Height Weight Hair Color Eye Color Gender (Male, Female)

Date of Birth

Company Information

Business Name you will operate under

City of Toledo Tax Identification No.

() -

Street Address (Business)

Telephone No. (Business)

() -

City, State, Zip

Fax No.

E-mail Address

Do you hold, or have you held, another contractor, journeyman, or apprentice license or registration with the City of Toledo?

Yes / No

Type(s) Describe

The following items must accompany this application form to make your application complete. Incomplete application documents will not be accepted.

- 1) \$200 Application Fee
- 2) Copy of Current State License
- 3) Copy of Certificate of Tax Registration from City of Toledo Tax Department
- 4) Signed Certificate of Appropriateness Agreement
- 5) Certificate of Liability Insurance (HVAC & Refrigeration Contractors only)

Applicant Signature

Sworn to and subscribed before me this _____ day of _____, 20____.
State of Ohio, County of Lucas

Notary Public _____ My commission expires on: _____

(OFFICE USE ONLY)

Approved _____ Date _____ Registration # _____

CITY OF TOLEDO



DIVISION OF TAXATION AND TREASURY

January 3, 2012

To Whom It May Concern:

The City of Toledo has a municipal income tax that is applicable to all construction work performed in the city. This construction activity is covered under Section 798.01 of the Toledo Municipal Code which requires tax registration when construction work is performed. In order to become registered with the City of Toledo Division of Taxation, you must complete the questionnaire on the reverse side of this letter. This questionnaire can be returned by facsimile at telephone number (419) 936-2318. A deposit of \$250 is required at time of registration. This deposit will be applied towards your estimated net profits income tax.

The rate of Toledo municipal income tax is two and one-quarter percent (2-1/4%). As an employer, you are required to withhold municipal income tax from all compensation paid to your employees while working inside the City of Toledo. You must also pay tax on net profits attributable to Toledo projects. Completing this questionnaire will enable us to furnish the proper forms to you to effect compliance with the Toledo Income Tax Ordinance and the Construction - Tax Registration Ordinance.

If your account number is listed under another name, please call the Division of Taxation at (419) 245-1662. We will make the necessary changes to our database.

Thank you for your consideration in this matter.

Sincerely,

Division of Taxation and Treasury

Encl. ITL

Toledo Income Tax Questionnaire

FAILURE TO FULLY COMPLETE MAY RESULT IN DELAYS IN ESTABLISHING YOUR ACCOUNT

Business Type:

Sole Proprietorship (Schedule C filer) Partnership (Form 1065) Corporation (Form 1120/1120S) Association _____ Federal Tax ID No.

Business Name _____ Owner or Corporate Officer's Name _____

Business Address _____ Owner's/Corporate Officer's Home Address _____

Business City, State, Zip _____ Owner's/Corporate Officer's City, State, Zip _____

Business Phone _____ Owner's Phone No. _____

Business Fax _____ Owner's/Corporate Officer's Social Security No. _____

Toledo Business Name _____ Partner's Name _____

Toledo Address, if different _____ Partner's Home Address _____

Mailing Address (if different) _____ Partner's City, State, Zip _____

Starting Date of Toledo Activities _____ Partner's Phone No. _____

1. Are there now or will there be employees subject to Toledo Income Tax? Yes _____ No _____
Will you be filing monthly (withholding > \$1,000/month)? Yes _____ No _____ Payroll starting Date _____
2. Accounting Period: Calendar Year? _____ or Identify Fiscal Year Ending _____
3. Nature of Business _____
4. Is local address the home office or a branch? _____
5. If your address is not in Toledo, do you conduct business within Toledo City limits? Yes _____ No _____
6. If you operate more than one place of business, give business name and location(s): _____

IF BUSINESS WAS OUTGROWTH OF ANOTHER, COMPLETE THE FOLLOWING

7. Name of former Owner(s) _____

8. Business Name _____

9. Mailing Address _____

10. Type of Organization: Sole Proprietorship _____ Partnership _____ Corp. _____ Association _____

11. Nature of Change: Sale _____ Discontinuance _____ Change in Ownership _____ Other _____

12. Accounting Period: Calendar Year _____ Fiscal Year Ending _____

Signature _____ Title _____

Printed Name _____ Date _____



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All City of Toledo licensed contractors are required to sign the form below prior to licensing or issuing permits.
Return this form to Division of Building Inspection. One Government Center, Suite 1600, Toledo, OH 43604.

Toledo Municipal Code

Section 1111.1101

“CERTIFICATES OF APPROPRIATENESS”

The following is the text of Toledo Municipal Code “Certificates of Appropriateness.”

1111.1101 Applicability: No contractor, owner or other person may make any environmental changes to any property designated as a historical landmark or within a designated historic district unless a valid written Certificate of Appropriateness has been issued by the respective Historic District Commission in accordance with procedures of this Section.

1111.1103 Initiation: Applications for a Certificate of Appropriateness for environmental changes upon landmarks or within designated historic districts shall be submitted directly to the Planning Director on forms provided by the Plan Commission, together with four complete sets of all applicable plans, designs, elevations, specifications and documents relating thereto.

1111.1104 No Retroactive Certificates: Applications for retroactive Certificates of Appropriateness shall not be accepted, and retroactive Certificates of Appropriateness shall not be issued.

1111.1105 Planning Director’s Review and Report: Upon receipt of all pertinent documents, the Planning Director:

- A. must inform the applicant of the review procedures and application requirements;
- B. has the authority to request from the applicant additional pertinent information regarding the proposed environmental change;
- C. must inform the respective Historic District Commission members of the Certificate of Appropriateness applications.

City of Toledo
Division of Building Inspection

It is hereby agreed between the City of Toledo, Division of Building Inspection, and the undersigned registered contractor or other Contractor or permit applicant that the undersigned acknowledges his/her knowledge of Chapter 1111.1101 which requires the prior approval of the Historic District Commission having jurisdiction for any environmental changes to property within the historic district. Without limiting the generality of the forgoing, the undersigned hereby agrees to comply with the provisions of 1111.1101 of the Toledo Municipal Code, a copy of which appears above.

Commissioner of Building Inspection

Date

Signature of license holder

Print name of license holder

Date

City of Toledo License Number