



CHARTER TOWNSHIP OF MILFORD

Oakland County

Building Department (M-Th 8:30-4:30)

(Fri. 8-3:30)

Reg. #: _____

Registration Form

Registration is necessary every time the state license expires or
First time pulling a permit in the Township.

Company Name: _____

Licensee Name: _____

Address: _____

State Lic. #: _____ Type of License: _____

Expiration Date: _____

Workman's Comp #: _____

(MESC #)

Federal ID #: _____

Insurance Company: _____

Policy #: _____ Expiration Date: _____

Licensed

Contractor Signature: _____

Phone #: _____ Date: _____

**This form must have an original signature of the
licensed contractor, for proper registration in Milford
Township.**

Clerk: _____

Date: _____