



Annual Application Fee: \$ 50.00
Pro Rated Fee: \$ _____
Receipt Number: _____
Date Paid: _____

Contractor's Business License Application

City of Wood Village
2055 NE 238th Drive
Wood Village, Oregon 97060
503.667.6211

Contractor's Business Name: _____

Owner's Name: _____

Business Phone No: _____

Business Email Address: _____

Business Mailing Address: _____

City _____ State _____ Zip _____

CCB# _____ Expiration Date: _____

Signature of Applicant: _____

Print Name of Applicant, if Different from Owner: _____

Date of Application: _____

To be completed by City of Wood Village:

Reviewed By: _____
Approval Signature

_____ Date Approved

Issued By: _____
Name of Issuer

Issued License No: _____

Dates Valid: _____ Issue Date: _____