



**Types of Contractor Business Licenses & Annual License Fees:**

<b>Contractor Business Type</b>	<b>Annual License Fee</b>
Sidewalk/Driveway Paving	\$ 25.00
Parking Lot Paving	\$ 25.00
Dumpster/Portable Storage	\$ 25.00
Sewer Connector	\$ 60.00

**Business Contractors must obtain a license from the City of Peoria if they wish to engage in or enter into contracts for any of the following:**

1. Paving, surfacing, or resurfacing of parking lots, business lots, off-street loading spaces, off-street parking facilities
2. Building, rebuilding, or repairing sidewalks, driveways, and driveway approaches
3. Placing a dumpster or portable storage unit in the public right-of-way
4. Connection with any sewer, drain, in any public street, avenue, alley, or other public place to the City of Peoria’s sewer

**Bond Required:**

All Applicants must provide a license and permit bond guaranteed by a corporate surety in the amounts listed below:

<b>Contractor Business Type</b>	<b>Bond Amount Required</b>
Sidewalk/Driveway Paving	\$ 10,000.00
Parking Lot Paving	\$ 5,000.00
Dumpster/Portable Storage	\$ 10,000.00
Sewer Connector	\$ 10,000.00

Bonds must be renewed annually. Proof of continuance of the issued bond is required upon the renewal of the license.

**License Renewals:**

All General Contractor Business licenses are valid for one (1) calendar year and expire December 31<sup>st</sup>. License fees are **not** prorated. Licenses must be renewed annually.

**Questions? Contact us.**

City of Peoria – Office of Accounts Receivable  
 Email: [ar@peoriagov.org](mailto:ar@peoriagov.org)  
 Phone: 309.494.8588  
 Address: 419 Fulton St. Rm. 111 Peoria, IL 61602



CONTRACTOR BUSINESS LICENSES APPLICATION

License Year: \_\_\_\_\_ License Number: \_\_\_\_\_

Type of License Applying For:

- Sidewalk/Driveway Paving Contractor
Parking Lot Paving Contractor
Dumpster/Portable Storage Contractor
Sewer Connector Contractor

If Renewing your License, provide your License Number: \_\_\_\_\_

Applicant Information:

Applicant Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Driver's License or State ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Licensed Business Information:

Business Name: \_\_\_\_\_

DBA Name: \_\_\_\_\_

Business Location Address: \_\_\_\_\_

- Business Type: Association Corporation Limited Liability Company Partnership Proprietorship

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

For a proprietorship or partnership, provide the name, mailing address, phone number, and date of birth of all owners. For a corporation, provide the name, mailing address, phone number, and date of birth for each officer, director, manager, or stockholder owning or controlling the voting rights to more than 5% of the stock of the corporation.

1. Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Position/Title: \_\_\_\_\_

2. Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Position/Title: \_\_\_\_\_



CONTRACTOR BUSINESS LICENSES APPLICATION

3. Name: \_\_\_\_\_
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Mailing Address: \_\_\_\_\_
Position/Title: \_\_\_\_\_

Has anyone listed on this application ever been convicted of a criminal offense or ordinance violation (other than traffic or parking offenses) in any jurisdiction?

[ ] YES [ ] NO

If YES, list the name of the person, offense, date of conviction, and location convicted:

\_\_\_\_\_
\_\_\_\_\_

Acknowledgement:

I/We certify that the information provided on this application is correct, as stated, to the best of my/our knowledge and belief. I/We agree to operate the described business in accordance with all regulations and conditions imposed by the laws of the State of Illinois and the laws, ordinances, and regulations of the City of Peoria. I/We understand any false statements could result in the revocation or denial of the requested license. I/We understand we cannot operate prior to receiving the requested license.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

This application will be considered complete when:

- ✓ All sections of this application are completed in their entirety,
✓ Required license and permit bond has been provided.
✓ License Fee has been paid in full.

Submit all indicated items above to:

City of Peoria
Office of Accounts Receivable
419 Fulton St. Rm. 111
Peoria, IL 61602

Phone: 309.494.8588 Email: ar@peoriagov.org
Website: www.peoriagov.org/269