

# Sandy Pines Contractor Application

Business name: \_\_\_\_\_

Applicant's name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Contractors License#: \_\_\_\_\_

I certify that the aforementioned business has liability insurance coverage for the type of work or service provided or performed within the property of Sandy Pines.

I also certify that the aforementioned business has the required workman compensation insurance as required by law.

I understand that liability insurance and workman compensation insurance must be maintained as applicable and current coverage present to perform work or provide service within the property of Sandy Pines.

I agree to and understand that the aforementioned business will comply with MIOSHA and OSHA regulations while performing work or providing services within Sandy Pines.

I also understand that I must comply with permit requirements and rules of Sandy Pines, State and local building code requirements and be responsible for all required permits.

Please include a copy of insurance(s) and contractors license.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date: