



CITY OF LONG BEACH BUILDING OFFICE
P O BOX 929
201 JEFF DAVIS AVENUE
LONG BEACH, MS 39560
(228) 863-1554
(228) 863-1558 FAX

CONTRACTOR LICENSING REQUIREMENTS AND APPLICATION

- 1. State of Mississippi contractor's license OR International Code Council test OR Proof of written examination by another municipality or government entity. (Letterhead with signature must contain score, month, day and year of examination)
2. Privilege license issued by municipality in which your business is located.
3. Certificate of liability insurance with the City of Long Beach listed as the certificate holder in amounts listed: \$100,000.00 per person, \$300,000.00 per occurrence and complete product coverage.

\*\* If you have held your license less than one calendar year you must provide 3 work letters of reference two from licensed contractors

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Please complete the following:

NEW APPLICATION \_\_\_\_\_

RENEWAL APPLICATION \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

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FOR OFFICE USE ONLY

Copy of privilege license: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

MS State Board of Contractor's License: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

-OR-

Exam Verification: \_\_\_\_\_ Date: \_\_\_\_\_

Certificate of Insurance: \_\_\_\_\_ Exp. Date: \_\_\_\_\_