

Borough of Bridgeport  
63 West Fourth Street, Bridgeport, PA 19405  
Phone 610-272-1811 Fax 610-292-8236

## Annual Contractor License

**Type of Contractor**

General  Plumbing  Electrical  Mechanical

**Business Name**

**Business Address**

No P.O. Box

**City, State, Zip**

**Phone #**

**Owners Name**

**Owner Address**

No P.O. Box

**City, State, Zip**

**Phone #**

**Type of Business**

**Liability Insurance Agency**

**Agents Phone #**

**FEE**

ALL FEES MUST BE PAID BY CHECK OR CASH. (CASH MUST BE THE EXACT AMOUNT)

**Signature**

**Date**

INCOMPLETE APPLICATIONS WILL BE RETURNED