



**APPLICATION FOR
FIRE PROTECTION CONTRACTOR REGISTRATION**

Fire & Rescue Department
Fire Prevention Bureau

One Government Center
Suite 1600
Toledo, Ohio 43604
phone 419-245-1220
fax 419-245-1329

toledo.oh.gov

- Fire Sprinkler Contractor including Underground (Class A)
- Alternative Suppression/Engineered Systems Contractor (Class B)
- Fire Alarm/Detection Contractor (Class C)

PRINT LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____ LAST 4 OF SSN: _____

PHONE () _____ E-mail: _____

Company Information

Business Name you will operate under _____

Street Address (Business) _____

City, State, Zip _____

City of Toledo Tax Identification No. _____

() _____ - _____

Telephone No. (Business)

() _____ - _____

Fax No.

E-mail Address _____

Do you hold, or have you held, another contractor, journeyman, or apprentice license or registration with the City of Toledo?

Yes / No	Type(s) Describe
_____	_____

The following items must accompany this application form to make your application complete. Incomplete application documents will not be accepted.

- 1) \$200 Application Fee for each classification of registration
- 2) Copy of Current State License
- 3) Copy of Certificate of Tax Registration from City of Toledo Tax Department
- 4) Signed Certificate of Appropriateness Agreement

Applicant Signature _____

Sworn to and subscribed before me this _____ day of _____, 20____.
State of Ohio, County of Lucas

Notary Public _____ My commission expires on: _____

(OFFICE USE ONLY)

Approved _____ Date _____ Registration # _____



City of Toledo
Division of Taxation and Treasury
One Government Center, Suite 2070
Toledo, Ohio 43604

To Whom It May Concern:

The City of Toledo has a municipal income tax that is applicable to all contractor work performed in the city. This contractor activity is covered under Section 798.01 of the Toledo Municipal Code which requires tax registration when contractor work is performed. In order to become registered with the City of Toledo, Division of Taxation, you must complete the questionnaire on page 2 of this letter. This questionnaire can be returned by facsimile at (419) 936-2318. A deposit of \$250 is required at the time of registration. This deposit will be applied towards your estimated net profits income tax.

The rate of Toledo municipal income tax is two and one-half percent (2-1/2%). As an employer, you are required to withhold municipal income tax from all compensation paid to your employees while working inside the City of Toledo. You must also pay on net profits attributable to Toledo projects. Completing this questionnaire will enable us to furnish the proper forms to you to effect compliance with the Toledo Income Tax Ordinance and the Contractor – Tax Registration Ordinance.

If your account number is listed under another name, please call the Division of Taxation at (419) 245-1662 and we will make the necessary changes to our database.

Sincerely,

Tax Auditor
419-245-1662

Encl

For Office Use Only

ACCT #

Date:

**City of Toledo
Division of Taxation**

One Government Center, Ste 2070, Toledo, OH 43604, Office (419) 245-1662, FAX (419) 936-2320
Email: incometax@toledo.oh.gov

New Business Registration Form

Business/Account Type:

- (R) Schedule C or E
 (B) Form 1065
 (C) Form 1120/1120S
 (B) Form 1041
 (W) Withholding

FEDERAL TAX ID # (If Applicable)

Toledo Business Name

Business Name

Toledo Address (if different)

Business Address

Toledo Address City, State, Zip

Business City, State, Zip

Mailing Address (if different)

Business Phone #

Mailing Address City, State, Zip

Business Fax #

Email Address

- Starting date of Toledo activities _____
- Are there now or will there be employees subject to Toledo income tax? Yes _____ No _____
Will you be filing monthly (withholding > \$200/month)? Yes _____ No _____ Payroll starting date _____
- Accounting period: Calendar Year? _____ or Fiscal Year Ending _____
- Nature of business _____
- If your address is not in Toledo, do you conduct business within Toledo city limits? Yes _____ No _____

Corporate Officers:

Name

Residential Address

Social Security #:

President: _____

Treasurer: _____

Partners: (attach additional sheets if necessary):

Name

Residential Address

Social Security #:

Sole Proprietor: (including Single Member LLC):

Name

Residential Address

Social Security #:

Signature _____

Title _____

Printed Name _____

Date _____

Certificate of Appropriateness

One Government Center, Suite 1600 • Toledo, OH 43604 • Phone (419) 245-1220 • Fax (419) 245-1329 • www.toledo.oh.gov

All City of Toledo licensed contractors are required to sign the form below prior to licensing or issuing permits. Return this form to Division of Building Inspection. One Government Center, Suite 1600, Toledo, OH 43604.

Toledo Municipal Code

Section 1111.1101

“CERTIFICATES OF APPROPRIATENESS”

The following is the text of Toledo Municipal Code “Certificates of Appropriateness.”

1111.1101 Applicability: No contractor, owner or other person may make any environmental changes to any property designated as a historical landmark or within a designated historic district unless a valid written Certificate of Appropriateness has been issued by the respective Historic District Commission in accordance with procedures of this Section.

1111.1103 Initiation: Applications for a Certificate of Appropriateness for environmental changes upon landmarks or within designated historic districts shall be submitted directly to the Planning Director on forms provided by the Plan Commission, together with four complete sets of all applicable plans, designs, elevations, specifications and documents relating thereto.

1111.1104 No Retroactive Certificates: Applications for retroactive Certificates of Appropriateness shall not be accepted, and retroactive Certificates of Appropriateness shall not be issued.

1111.1105 Planning Director's Review and Report: Upon receipt of all pertinent documents, the Planning Director:

- A. must inform the applicant of the review procedures and application requirements;
- B. has the authority to request from the applicant additional pertinent information regarding the proposed environmental change;
- C. must inform the respective Historic District Commission members of the Certificate of Appropriateness applications.

City of Toledo
Division of Building Inspection

It is hereby agreed between the City of Toledo, Division of Building Inspection, and the undersigned registered contractor or other Contractor or permit applicant that the undersigned acknowledges his/her knowledge of Chapter 1111.1101 which requires the prior approval of the Historic District Commission having jurisdiction for any environmental changes to property within the historic district. Without limiting the generality of the forgoing, the undersigned hereby agrees to comply with the provisions of 1111.1101 of the Toledo Municipal Code, a copy of which appears above.

Commissioner of Building Inspection

Date

Signature of license holder

Print name of license holder

Date

City of Toledo License Number