



## CITY OF HERMISTON

BUILDING DEPARTMENT  
180 NE 2ND ST.  
HERMISTON, OR 97838  
(541) 667.5025 EXT 2  
building@hermiston.gov  
www.hermiston.gov

### NOTIFICATION OF CONTRACTOR LICENSE INFORMATION

**All people engaged in work in the City of Hermiston shall first obtain a City business license and have the appropriate Oregon contractor license(s). You must submit this contractor license information prior to permit issuance. You may contact us with changes.**

To conform with the Oregon Residential Specialty Code (ORSC), Section R110 and City of Hermiston municipal code § 119.04 I am submitting the following;

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

Building permit number: \_\_\_\_\_

Owner's name: \_\_\_\_\_

Job Address: \_\_\_\_\_

General contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

HVAC contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Plumbing contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Electrical contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Additional sub-Contractors

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional sub-contractor name: \_\_\_\_\_

CCB license number: \_\_\_\_\_ City Business license number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

General Contractor/owner signature: \_\_\_\_\_

Printed name: \_\_\_\_\_