



# City of Wabash

## BUILDING DEPARTMENT

202 S Wabash St  
Wabash, IN 46992  
Phone-260.274.1491  
Fax-260.563.0876  
buildingdepartment2@wabashcity.in.gov

### CITY OF WABASH CONTRACTOR REGISTRATION APPLICATION 2026

**OFFICE USE ONLY**

CONTRACTOR #: \_\_\_\_\_

RECEIVED DATE: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

PERMIT COST: \_\_\_\_\_

RECEIPT #: \_\_\_\_\_

PAYMENT TYPE: \_\_\_\_\_

**APPLICANT INFORMATION**

APPLICANT NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

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

EMAIL: \_\_\_\_\_

**BUSINESS INFORMATION**

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

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

BUSINESS EMAIL : \_\_\_\_\_ TAX ID # \_\_\_\_\_

NAME AND ADDRESS OF ALL MEMBERS/OFFICERS OF FIRM, LLC, OR CORPORATION:

Name	Address
_____	_____
_____	_____

Name	Address
_____	_____
_____	_____

YEARS IN BUSINESS: \_\_\_\_\_ NUMBER OF EMPLOYEES: \_\_\_\_\_ INDIANA PLUMBING LICENSE #: \_\_\_\_\_

**BUSINESS DETAILS**

BRIEF DESCRIPTION OF THE TYPE OF WORK YOU DO: \_\_\_\_\_

**REQUIRED PERMIT APPLICATION ATTACHMENTS**

ONE COPY OF THE FOLLOWING SHALL BE INCLUDED WITH APPLICATION:

☐ **PROOF OF INSURANCE**

- Personal Injury \$100,000.00 per occurrence and \$300,000.00 in the aggregate; and**
- Worker's Compensation Insurance**

Submit digital copies to:

buildingdepartment2@wabashcity.in.gov

**CERTIFICATION & NOTICE OF INTENT TO COMPLY**

I hereby declare that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false statements may result in the rejection of my application. I further acknowledge that the Building Department and/or City of Wabash Enforcement Authority is hereby authorized to enter the premises to perform necessary inspections and that the violation of applicable codes and ordinances may result in the assessment of fines and penalties.

\_\_\_\_\_  
Authorized Agent (signature)\_\_\_\_\_  
Authorized Agent (printed)\_\_\_\_\_  
Date

\*This form can be filled and submitted directly when opened with Adobe. If you do not have Adobe you can download it for free at: <https://get.adobe.com/reader/>  
This form and any attachments can also be submitted via email to: buildingdepartment2@wabashcity.in.gov