



City of Oakland

**PLANNING & BUILDING DEPARTMENT  
BUREAU OF BUILDING  
CLEAN-UP CONTRACTOR  
APPLICATION**

[inspectionscounter@oaklandca.gov](mailto:inspectionscounter@oaklandca.gov)

Clean-up Contractor

Submittal Date \_\_\_\_\_

**APPLICANT INFORMATION**

Contractor Name:

Company name:

Phone:

Fax:

E-mail:

Mailing Address:

City:

State:

ZIP Code:

Associate Name:

E-mail:

Telephone:

Other:

**LICENSING INFORMATION**

Primary Business Address:

City:

State:

ZIP Code:

Contractor Name:

Telephone:

Fax:

E-mail:

State Contractor License Number (include copy with application):

Other License Number (include copy with application):

City Business Tax Number:

Expiration Date:

Worker's Compensation Insurance: (copy from Carrier)

W9 (include copy):

General Liability Insurance

Carrier Name: (copy from Carrier)

**AGREEMENT**

1. Maintain annual business license, contractor license and permit.
2. Sign up for ISUPPLIER

**SIGNATURES**

Title:  
Date:

Title:  
Date:

**OFFICE USE ONLY**

Verified Contractor's License# \_\_\_\_\_

Verified City Business Tax# \_\_\_\_\_

Verified Worker's Compensation Insurance \_\_\_\_\_

Verified General Liability Insurance \_\_\_\_\_

Approved:

Not Approved:

Reason:

Approved by:

Date:

Planning & Building Department  
250 Frank H. Ogawa Plaza 2<sup>nd</sup> Floor  
Oakland, CA 94612  
510-238-3381