



CITY OF BEXLEY

BUILDING DEPARTMENT

2242 E. Main Street
Bexley, Oh 43209
(614) 559-4240

LANDSCAPE CONTRACTOR PERMIT REGISTRATION

Date: _____

Name of Applicant: _____

Name of Company: _____

Company Address: _____
City State Zip

Phone: _____ Fax: _____

Federal Tax ID Number: _____

E Mail Address: _____

By signing this application, I agree to the terms and conditions for Landscape Contractor Permit Registration in the City of Bexley, Ohio, as set forth in Bexley Ordinance No. 98-08.

Signature of Applicant

Registration Fee: \$25.00

Approved by: _____
Building Official

Date Approved: _____ Registration No: _____

TO VIEW CURRENT FEES AND DOWNLOAD PERMIT APPLICATIONS
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