



## WRECKING LICENSE REQUIRED ITEMS LIST

THIS IS A TWO-SIDED DOCUMENT. PLEASE REVIEW BOTH SIDES.

Please submit all required documentation, outlined below, as required for the filing status in which you are applying. Once you complete the application(s) and obtain the required documents, please submit all documents together for processing. Documents may be submitted via email to [Contractors@indy.gov](mailto:Contractors@indy.gov) or mailed to the address shown in the top, left-hand corner of this page. Partial application packets will not be accepted. Any incomplete or incorrect information will result in the entire application packet being returned for revisions.

Wrecking licenses expire on December 31st of odd-numbered years and are renewable every two years. Please note that *business entity type changes* will require a new business license to be issued.

The term *wrecking* includes the demolishing, dismantling, dismembering, razing, or removing of structures.

The business name on all the documentation provided (application(s), certificate of insurance, bond, workman's compensation, registration, etc.) must read exactly the same.

### ☐ COMPLETED COMPANY LICENSE APPLICATION

### ☐ COMPLETED CRAFT LICENSE HOLDER APPLICATION(S)

- Each business must have at least one wrecking license holder who has taken and passed the required examination. For more information on this, please contact Trade Board & Licensing Coordinator, Jessica Knight, at [Jessica.Knight@indy.gov](mailto:Jessica.Knight@indy.gov) or 317-327-8467.
- Each license holder must be connected to a business license.

### ☐ PROOF OF BUSINESS REGISTRATION

- The business name on the documentation must match the business name as it is registered, if registration is required.
- SOLE PROPRIETORS AND PARTNERSHIPS
  - Business name should be listed as: "Owner(s) Name' DBA (doing business as) 'Business Name'".
    - If the DBA includes the surname(s) of the proprietor or partners, registration of the business name is not required.
    - If the DBA does not include the surname(s) of the proprietor or partners, the DBA must be registered in the county in which the business originates. Proof of the DBA registration must be submitted with this application. If the county does not record DBA information, submit a letter from the county stating their policy.
- LLCs and CORPORATIONS
  - Proof of registration with the Indiana Secretary of State

### ☐ CERTIFICATE OF INSURANCE – Declarations will not be accepted.

- ☐ States the policy number or "Binder" (A Binder is only valid for 30 days from the date of policy issuance.)
- ☐ States the effective and expiration dates of the coverage
- ☐ Business name listed as the Insured.
- ☐ City of Indianapolis listed as Certificate Holder with Department's address (The Department's address is in the top, left-hand corner of this page.)
- ☐ No language limiting coverage to a single job, a single address, a specific scope of work, or to only permitted work
- ☐ States written notice will be given to the Department at least 15 days prior to cancellation of the policy

Requirements continue on Page 2.

☐ **GENERAL LIABILITY POLICY**

- ☐ Minimum of \$500,000 for each occurrence of death or bodily injury and Minimum of \$100,000 for each occurrence of property damage\_ OR Minimum of \$500,000 per occurrence for combined coverage of both bodily injury and property damage
- ☐ The “Consolidated City of Indianapolis” is named as Additional Insured and that statement is shown on the front/face of the Certificate, with no language requiring a contract or agreement for the coverage
  - If an endorsement is needed to list the City as Additional Insured without requiring a contract or agreement, use ISO CG2036 0413 or an equivalent. We require the Additional Insured as the grantor of the license only.
    - If an endorsement is listed on the certificate, a copy of the endorsement must be provided.

☐ **WORKER’S COMPENSATION POLICY – Must carry Workman’s Compensation Insurance for workers employed in Indianapolis/Marion County**

- If your business does not have employees:
  - Sole Proprietors, Partnerships, and LLCs must complete the Worker’s Compensation waiver box on Page 2 of the Company License Application
  - Corporations are required to carry workman’s compensation coverage – at least covering the owner/principal – by Indiana State Law, including Sub-S Corporations. If there are no employees, you must complete the Workman’s Compensation Exemption Certificate Clearance Waiver issued by the State of Indiana.

☐ **LICENSE OR PERMIT SURETY BOND (OR BOND CONTINUATION CERTIFICATE FOR LICENSE RENEWALS)**

- ☐ Type-written (Hand-written bonds will not be accepted)
- ☐ Business name is listed as the Principal
- ☐ Bond number provided
- ☐ Name, address, and phone number of the bonding company and insurance agent present
- ☐ Correct amount:
  - \$30,000 for Type A licenses
  - \$20,000 for Type B licenses
  - \$10,000 for Type C licenses
- ☐ “Consolidated City of Indianapolis and/or an Unknown Third Party” named as Obligatee
- ☐ Indicates coverage for a Wrecking Contractor
- ☐ Signed by the principal (If partnership, all partners must sign)
- ☐ Expiration date of 12/31/2025 present. Continuous bonds will not be accepted.
- ☐ Confirmation of surety company’s authority to do business in Indiana

☐ **LICENSE FEES**

- Business license fees are not assessed for sole proprietorships; only the license holder fees are assessed.
- New License Holder Fee – Prorated fee amount based on when the license is applied for during the license term:
  - Applied for 01/01/2024 to 06/30/2024: \$377.00
  - Applied for 07/01/2024 to 12/31/2024: \$283.00
  - Applied for 01/01/2025 to 12/31/2025: \$189.00
- New Business License Fee – Prorated fee amount based on when the license is applied for during the license term:
  - Applied for 01/01/2024 to 06/30/2024: \$247.00
  - Applied for 07/01/2024 to 12/31/2024: \$185.00
  - Applied for 01/01/2025 to 12/31/2025: \$124.00
- Business Renewal Fee: \$247.00
- License Holder Renewal Fee: \$247.00
- Additional Authorized Agent Fee [if exceeding (5) five agents]: \$63.00 each

Additional Contact Information:

**Indiana Secretary of State**

(317)232-6576

<https://inbiz.in.gov>

**Worker’s Compensation Board of Indiana**

(317)232-3808 for Indianapolis-based businesses

(800)824-COMP for outside of Indianapolis

<https://www.in.gov/wcb/>