



7887 East 60th Avenue
 Commerce City, Colorado 80022
 Phone (303) 289-3683 / Fax (303) 289-3731
<http://www.c3gov.com>

*Community Development
 Department*

CONTRACTOR'S LICENSE APPLICATION

<p>CITY OF COMMERCE CITY DIVISION OF BUILDING SAFETY 7887 EAST 60TH AVENUE COMMERCE CITY, CO 80022 PHONE (303) 289-3683 FAX (303) 289-3731 INSPECTION LINE (303) 289-3671</p>	<p style="text-align: center;">Shaded Areas For Office Use Only</p> <p>License Issue Date: _____</p> <p>License No. _____</p> <p>Insurance Expires: _____</p>
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GENERAL CONTRACTOR	FEES	License Expiration Date: December 31, 20_____
<input type="checkbox"/> Class A	\$165	LICENSES ARE NOT PRORATED AND WILL EXPIRE AT THE END OF THE CALENDAR YEAR.
<input type="checkbox"/> Class B	\$110	
<input type="checkbox"/> Class C	\$80	International Code Council (ICC) Contractor Certification Required for Class A, B, C, D, Mechanical, and Roofing Licenses.
<input type="checkbox"/> Class D	\$80	
<input type="checkbox"/> Subcontractor*	\$75	
*Please specify subcontractor type: _____		
<input type="checkbox"/> Other (specify): _____		
<input type="checkbox"/> Electrical Registration	N/A	
<input type="checkbox"/> Plumbing Registration	N/A	

Type of Ownership: Utility Company Individual Partnership Corporation

PLEASE PRINT

License Issued To: _____
(Trade Name)

Business Location: _____

Mailing Address: _____

Phone No.: _____ **Fax No.:** _____ **E-Mail:** _____

NAMES AND ADDRESSES OF PARTNERS OR OFFICERS OF BUSINESS

Name	Residence Address	% Owned
_____	_____	_____
_____	_____	_____

Authorized Agent: _____

OTHER LICENSES

Plumber Master's License No.: _____ State Plumbing Contractor Registration No.: _____

Electrical Master's License No.: _____ State Electrical Contractor Registration No.: _____

Other City License and No.: _____ ICC Certification No.: _____

I declare, under penalty of perjury, that this application has been examined by me and the statements made herein are made in good faith, pursuant to the City of Commerce City laws and regulations, and to the best of my knowledge and belief are true, correct, and complete.

SIGNATURE: _____ **DATE:** _____