



7887 East 60th Avenue
 Commerce City, Colorado 80022
 Phone (303) 289-3790 / Fax (303) 289-3731
<http://www.c3gov.com>

CITY OF COMMERCE CITY
Community Development
Building Safety Division

CONTRACTOR LICENSE APPLICATION

| | |
|---|---|
| CITY OF COMMERCE CITY DIVISION OF BUILDING SAFETY 7887 EAST 60TH AVENUE COMMERCE CITY, CO 80022 PHONE (303) 289-3790 FAX (303) 289-3731 | Shaded Areas For Office Use Only License Issue Date: _____ License No. _____ Insurance Expires: _____ |
|---|---|

| | | |
|--|-------------|---|
| 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. For all Right-of-Way Licenses, please send application to: Public Works 8602 Rosemary Street Commerce City, CO 80022 Office: 303-289-8150 • Fax: 303-289-8165 |
| <input type="checkbox"/> Class B | \$110 | |
| <input type="checkbox"/> Class C | \$80 | |
| <input type="checkbox"/> Class D | \$80 | |
| <input type="checkbox"/> Subcontractor* | \$75 | |
| *Please specify trade: _____ | | |
| <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 LLC

PLEASE PRINT

Business Name: _____ (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 |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

| 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:** _____