



# FREMONT COUNTY BUILDING DEPARTMENT



## APPLICATION FOR CONTRACTOR'S LICENSE

To be considered complete, this application form shall be accompanied by:

- o evidence that the applicant has successfully completed the appropriate ICC examination (when applicable);
- o any required additional or alternative examination;
- o insurance certificate (see below);
- o payment of any required licensing fees

Name of Applicant: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

License Class Applied For (check one):

- |                                    |  |  |
|------------------------------------|--|--|
| <input type="checkbox"/> General A | <input type="checkbox"/> E1 Foundations and Concrete | <input type="checkbox"/> F1 Masonry                  |
| <input type="checkbox"/> General B | <input type="checkbox"/> E2 Framing and Carpentry    | <input type="checkbox"/> F2 Siding and Exterior Trim |
| <input type="checkbox"/> General C | <input type="checkbox"/> E3 Roofing                  | <input type="checkbox"/> F3 Stucco and Plastering    |
| <input type="checkbox"/> General D | <input type="checkbox"/> E4 Solar Installation       | <input type="checkbox"/> F4 Insulation               |
|                                    |  | <input type="checkbox"/> F5 Drywall                  |

Insurance Requirements- (see section 116.9 of the Building Code of Fremont County)

License Category	Bodily Injury	Property Damage	C.S.L.*
General (Class A, B, C or D)	100,000/300,000	100,000	500,000
Limited Trade (Class E or F)	50,000/100,000	100,000	300,000

\* Combined Single Limit

Worker's Compensation Insurance shall be provided in accordance with Colorado Revised Statutes and compliance shall be the sole responsibility of the licensed contractor.

Applicant's Signature \_\_\_\_\_ Application Date \_\_\_\_\_

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Fee: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Receipt # \_\_\_\_\_ Received by: \_\_\_\_\_

Application APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Building Official Signature \_\_\_\_\_ Approval Date \_\_\_\_\_

This license is valid for a period of one year and shall expire at 11:59 p. m. on the expiration date printed above.