

CONTRACTOR LICENSE APPLICATION

 NEW

 RENEWAL

*For additional information and details on requirements, refer to the [Contractor License Information packet](#)

Company Information (Please Type or Print Legibly)	
Business Name: _____	Contractor Number: LCC _____
Insurance Co Name (Gen. Liability): _____	Policy # _____ Exp. Date: _____
<input type="checkbox"/> FOR RENEWALS ONLY: Check here if you have <u>verified</u> your business information in our system and no changes are needed	
Business Address: _____	City: _____ State: _____ Zip: _____
Mailing Address: _____	City: _____ State: _____ Zip: _____
Business Phone: _____	Fax: _____ Cell: _____
Primary Business E-Mail Address: _____	
Select one of the following: <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor (MUST APPLY IN PERSON)*	

Business Officer/Member/Partner: Please provide the name and address of one officer, member or partner:
First Name: _____ MI: _____ Last Name: _____ Title: _____
<input type="checkbox"/> Check here if contact information is same as above
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Cell: _____
E-Mail Address: _____
Company Representative Name (if different from above): _____ Phone: _____

License Information	Checkmark next to the license(s) requested
<input type="checkbox"/> Class A General Contractor Unlimited	\$200.00 Test or reciprocal license -COPY REQUIRED
<input type="checkbox"/> Class B Building Contractor Unlimited except Type I A & B, Limited to 3 stories	\$150.00 Test or reciprocal license -COPY REQUIRED
<input type="checkbox"/> Class C Residential Contractor	\$100.00 Test or reciprocal license -COPY REQUIRED
<input type="checkbox"/> Class D Mechanical	\$75.00 Test or reciprocal license -COPY REQUIRED
<input type="checkbox"/> Class D Plumbing	\$75.00 State Contractor and Master -COPY REQUIRED
<input type="checkbox"/> Class D Plumbing/Mechanical combo license	\$75.00 (see plumbing and mechanical requirements above)
<input type="checkbox"/> Class D Roofing	\$75.00 Test or reciprocal license -COPY REQUIRED
<input type="checkbox"/> Class D Roofing/Siding combo license	\$75.00 (see roofing requirements above, none for siding)
<input type="checkbox"/> Class D Electrical Registration	no fee State Contractor and Master -COPY REQUIRED
<input type="checkbox"/> Class D Other: _____	\$75.00 No Requirement

CONFIDENTIAL
Upon a public request for this document a requestor release form shall be executed or this information shall be redacted.
Driver's License Number: _____ Issuing State: _____ Date of Birth: _____

I hereby confirm that the above information is true to the best of my knowledge and that I will notify the Building Inspection Division of any changes to the status, company name or address in accordance with Section 10-122 of the Thornton City Code. I also confirm that I have read and understand the responsibilities of a license holder as stated in Section 10-121 of the Thornton City Code.

Company Representative **SIGNATURE**

Date