



Elbert County Building Department

215 Comanche Street/P.O. Box 7 ~ Kiowa, CO 80117
720-595-3619

APPLICATION FOR CONTRACTOR LICENSE

Company Name:	
Applicant Name:	
Address:	
City/State/Zip:	
Phone:	Email:

<input type="checkbox"/>	Class A Contractor	<input type="checkbox"/>	Class B Contractor	<input type="checkbox"/>	Class C Contractor	<input type="checkbox"/>	Roofing Contractor
<input type="checkbox"/>	Class A Mechanical	<input type="checkbox"/>	Class B Mechanical	<input type="checkbox"/>	Class C Mechanical	<input type="checkbox"/>	
	Specialty	Type of work					

In order to be granted a contractor's license in unincorporated Elbert County you must provide proof that you have passed an appropriate ICC exam or provide a copy of a valid license issued from a testing jurisdiction.

List the jurisdiction(s) or type of ICC Exam(s): _____

LAWFUL PRESENCE

Applicant must provide a valid form of identification.

Type of ID:	ID#:
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I swear or affirm under penalty of perjury under the laws of the State of Colorado that I am (check one of the following):

<input type="checkbox"/>	A United States Citizen
<input type="checkbox"/>	A Legal Permanent Resident of the United States
<input type="checkbox"/>	Otherwise lawfully present in the United States pursuant to federal law

CONTRACTOR RESPONSIBILITY

I hereby confirm that the information contained in this form is accurate. I agree to preform my duties in conformance with all Elbert County regulations and adopted codes and the contractor licensing provisions, which I have read and understand. I agree to notify the building department promptly of any changes in my status, company name or address, contact information, lawful presence status, or type of construction activity that I am performing.

Applicant Signature: _____ Date: _____