2401 Sheridan Boulevard
Edgewater, Colorado 80214
www.edgewaterco.com
Fax: 303-238-7192
720-763-3001
jschartz@edgewaterco.com

CONTRACTOR LICENSE APPLICATION

❒ **New License** (Fill out both sides of form.)

❒ **License Renewal** (Fill out first page of form and **sign the Oath of Application** second page.)

This application is for the following Contractor License Type:

❒ General Contractor Class A (Commercial/Unlimited)
❒ General Contractor Class B (Single Family Dwelling)
❒ General Contractor Class C (All Others/Sub Contractors)
❒ Mechanical
❒ Plumbing
❒ Electrical

1. Company Name: _____
2. Applicant Contact Name (please print): _____
3. Physical Address of Business:

_____
Street Address City State Zip Code

4. Business Mailing Address (if different from physical location):

_____
Street Address City State Zip Code

5. Business Phone: _____ 6. Business Fax Number: _____
7. Home/Cell Phone Number: _____ 7. Email Address: _____
8. Type of Work: _____

General Contractors		
Class A Fee	**Class B Fee**	**Class C Fee**
Annual License $153.00	Annual License $103.00	Annual License $78.00
One Project Only $53.00	One Project Only $53.00	One Project Only $53.00

Mechanical License Fee	Plumbing License Fee
Annual License $53.00	Annual License $53.00

9. If you are applying for a Plumbing or Electrical Contractor's License please complete the following section and then proceed to signature line. If not please proceed to section 10:
   a. Name of Master Plumber/Electrician: _____
   b. Master Plumber/Electrician License No.: _____
   c. State Contractor License No.: _____

10. **This application must be accompanied by:**
   a. Certificate of Liability Insurance with maximum limits of not less than $500,000 per person and $1,000,000 per occurrence, and property damage insurance with minimum limits of not less than $500,000 per occurrence.
   b. Copy of master license when applicable.
   c. Copy of Valid Colorado Driver's License, Colorado ID card, Military ID, Coast Guard Mariner, or Native American Tribal Documents.
   d. Applicable fee.

11. The following are the qualifications of: _____ (individual name).

12. Position: _____

13. Number of years performing as:
    Contractor: _____ Superintendent: _____
    Foreman: _____ Journeyman: _____
    Owner/Builder: _____

14. School or related trade education. Institution name: _____
    From: _____ To: _____

15. Do you now hold a valid contractor's license from any other jurisdiction(s)? ❒ es ❒ No

16. If yes, please provide a copy.

17. List below some projects you have supervised or contracted in the past:

    a. _____
    Street Address City State Zip Code
    Type of construction: _____ Year: _____

    b. _____
    Street Address City State Zip Code
    \ Type of construction: _____ Year: _____

18. List some references from persons active in the construction trade (this could include suppliers or other contractors familiar with you):

    a. Name: _____ Occupation: _____ Phone: _____
    _____
    Street Address City State Zip Code

    b. Name: _____ Occupation: _____ Phone: _____
    _____
    Street Address City State Zip Code

    c. Name: _____ Occupation: _____ Phone: _____
    _____
    Street Address City State Zip Code

Oath of Application		
I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge and belief. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Edgewater Municipal Code and all Rules and Regulations which govern my Contractor License. I further acknowledge that it is my responsibility to provide the City with amendments to this application in the event that any information provided herein changes after the date of application.		
Authorized Signature	Printed Name and Title	Date

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LAWFUL PRESENCE AFFIDAVIT

SOLE PROPRIETORSHIP

(DOES NOT INCLUDE CORPORATIONS, LIMITED LIABILITY COMPANIES OR PARTNERSHIPS)

_____ New License _____ License Renewal

I, _____, dba _____
swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

____ I am a United States citizen, or
____ I am a Permanent Resident of the United States, or
____ I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

_____ _____
Signature Date

Form of ID Presented: _____

Valid Colorado Driver's License, Colorado ID card, Military ID, Coast Guard Mariner, Native American Tribal Documents are acceptable forms of identification.

STATE OF COLORADO)
) ss
COUNTY OF JEFFERSON)

I, _____Notary Public in and for said County and State, do hereby certify that on this ___day of _____, 20_____, _____appeared before me in person and executed the above instrument.

IN WITNESS THEREOF, I have hereunto set my hand and seal.

_____
Notary Public

My commission expires: _____