



Contractor Licensing Application Checklist

Incomplete application packets will not be accepted

Business Name _____

Date _____

License Holder _____

Supervisor's Certificate Holder _____
 (If different than license holder)

- ☐ **New License**
 ☐ **Renewal**
 ☐ **Reinstatement** (Past 60-day grace period)
 ☐ **Exempt Contractor**
☐ **Business Name Change**
 ☐ **Master Electrician**
 ☐ **Master Plumber**

Please follow the corresponding column below

New	Reinstatement	Renewal	Business Name Change	Exempt Registration	Master Electrician	Master Plumber	<u>Required Items - Incomplete application packets will not be accepted</u>
							Application / Registration- Complete, signed and dated
							Picture ID – Current, valid Driver's license, passport, or work permit – Must be readable copy
				N/A	N/A	N/A	Employee Affidavit – Must be signed by applicant and notarized <ul style="list-style-type: none"> General contractors are not permitted to use exempt workers
							Immigration Affidavit – Must check appropriate box, sign, and date
		N/A	N/A	N/A			Exam – ICC National Standard 2018 code year or new; Solar license - NABCEP, Master Plumber - State Cards, Master Electrician – State Cards <ul style="list-style-type: none"> No exam required for Signs, Awnings, Demolition, **Fire Alarm Systems, **Fire Sprinkler Systems, Fireplace Appliances, **Flammable Fuel Facilities, Wireless Telecommunication Systems No exam required for license holder that is designating another person as their supervisor's certificate holder (**Requires approval from Poudre Fire Authority)
							General Liability and Worker's Compensation (if you have field employees) <ul style="list-style-type: none"> Minimum \$2 million aggregate coverage on general liability The "City of Fort Collins, 281 N. College Ave., Ft. Collins, CO 80524" must be listed as a certificate holder
	N/A	N/A	N/A	N/A	N/A	N/A	Project Verifications (3) – Must be complete, including documentation <ul style="list-style-type: none"> Must be verified and signed by other than the applicant (supervisor's certificate holder) Must attach copies of permits for each verification Must attach C/O, LOC or passing final inspection information for each verification
					N/A		Fee – There is a \$75 application fee for all new license and supervisor's certificates <ul style="list-style-type: none"> \$300 - New license and supervisor's certificate or reinstatement (Includes \$75 non-refundable application fee) \$225 - Renewal of license and supervisor's certificate - General and subcontract trades \$200.00 – Master Plumber, Exempt Subcontractor \$100 – New supervisor's certificate only \$25 – Renewal of supervisor's certificate only



Development Review Center
281 N. College Ave., Fort Collins, CO 80524
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Master Plumber / Master Electrician Registration

☐ **New Registration**

☐ **Business Name Change**

☐ **Renewal**

• Registration # _____

☐ **Reinstatement**

(If expired more than 60 days)

Office Use Only

Issue Date: _____

Exp. Date: _____

Registration # _____

CL: _____

Business Name _____

Registrant (Applicant) _____

Mailing Address _____

Phone# _____ **Mobile#** _____ **FAX#** _____

E-Mail Address _____

Registration Requested

Master Electrician ☐ Master Plumber ☐

(Must be listed with the State of Colorado as the supervising individual)

The following must also be submitted along with the checklist items to process this registration request:

Incomplete registration packets will not be accepted

☐ Copy of current Master Electrician or Master Plumber License

☐ Copy of current Active State of Colorado Contractor's Card

Name of person applying for registration *[print]* _____

Signature _____ Date _____

Office Use Only

\$200 registration fee received _____ Yes _____ No Date _____ Staff _____
(Plumbers only)

Authorized Signature _____ Date _____



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AFFIDAVIT

Pursuant to section 24-76.5(4)(b), C.R.S.

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

- _____ A United States citizen: or
- _____ A legal Permanent Resident of the United States: or
- _____ Otherwise lawfully present in the United States pursuant

I understand that this sworn statement is required by law because I have applied for a public benefit as defined by law. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of the 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.

If I checked the second or third option above, I understand that my lawful presence in the United States will be verified through the Federal Systematic Alien Verification of Entitlement Program (SAVE Program).

Printed Name

Signature

Company Name

Date

For office use only:

City of Fort Collins License #

City of Fort Collins Supervisor's Certificate #