



401 Locust Street • P.O. Box 435 • Frederick, CO
80530-0435

Phone: (720) 382-5500 • Fax: (720) 382-5520

www.frederickco.gov

CONTRACTOR'S LICENSE APPLICATION

1. Type of Ownership: Please supply the Town with a copy of your Certificate of Good Standing or if you are a Sole Proprietor or Partnership, please complete and return the attached Lawful Presence Affidavit.
3. Owner Name: _____
4. Address: _____
5. Name of Business: _____
6. Location of Business: _____
Street Address City, State Zip Code
7. Mailing Address: _____
Street Address City, State Zip Code
8. Phone #: _____ E-mail Address: _____
9. What is your Main Business? _____
10. Business: Class A (General) _____; Class B(1)E (Electrical) _____;
 Class B(1)P (Plumbing) _____; Class B(2) (HVAC); _____
 Class C Irrigation/roof/siding/drywall/paver/painter) _____;
 Class D(1) (Mason/fence/excavation) _____; Class D(2) (Signs/glaziers) _____
 Number of Employees: _____ Full Time _____ Part Time

Please attach a copy of your certificate of Insurance – Coverage: Public Liability \$100,000 occurrence, \$300,000 aggregate; Auto Liability \$100,000 each person, \$300,000 each accident; Workers Compensation – in accordance with State laws.

Insurance Company: _____

Name of Agent: _____ Phone: _____

I declare under penalty of perjury in the second degree that the statements made in this questionnaire are true and complete to the best of my knowledge.

Authorized Signature: _____ Date: _____

For Office Use Only:

License Classification: _____ Fee: _____ Method of Payment: _____

Built on What Matters .



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LAWFUL PRESENCE AFFIDAVIT

I, _____, 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

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