



Contractor Licensing
281 N College Ave. P.O. Box 580
Fort Collins, CO 80524
Phone 970-416-2740 Fax 970-224-6134
www.fcgov.com/nbs/contractor.php

RESUME FOR ALARM BUSINESS PERMIT

(PLEASE PRINT)

PERSONAL HISTORY:

Name: Maiden Name:

Date of Birth: Place of Birth:

Present Address:

Telephone Number -- Home: Telephone Number -- Work:

Place of Employment:

Have you been convicted of a crime (including traffic) in the past 15 years? Yes No

If so, give date, location and charge:

EMPLOYMENT HISTORY:

List all places of employment for the past ten (10) years, beginning with the most recent:

Table with 4 columns: Place of Business, Address, From, To. Includes multiple blank rows for data entry.

RESIDENCE HISTORY:

List all residences for the past ten (10) years, beginning with current residence:

Table with 4 columns: Place of Residence, Address, From, To. Includes multiple blank rows for data entry.

I certify that the statements made in this Resume are true and correct to the best of my knowledge; I understand that any false or misleading statements may result in denial of my application.

Signature of Applicant

Date