



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

SPECIALIZED TRADE CONTRACTOR APPLICATION -- PFA

Business Name of License Holder: _____

License Holder Name (if desired): _____

Mailing Address: _____

Phone#: _____ Mobile#: _____ FAX#: _____

E-Mail Address: _____

Specialized Trade category (*✓ one only – see Contractor Packet for specific requirements*):

Fire Sprinkler Systems Flammable Fuel Facilities Special Fire Extinguishing

Credential Category (*✓ one only – see Contractor Packet for specific requirements*):

License Only Supervisor Certificate License & Supervisor Certificate

Contractor licenses currently held: _____

Person(s) designated to be Construction Supervisor(s) *[separate applications required for other than License Holder]*:

Have you or has your firm ever had a contractor license revoked or suspended? _____ Yes _____ No

If yes, please provide details: _____

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The following must be attached to your application for a complete submittal:

- \$75 Non-refundable application fee
- 5 or more completed Project Verification Forms (depending on License type)
- Completed Employee Affidavit
- Completed Sales/Use Tax License Application
- Any additional information you want us to consider, i.e., a resume, additional education and/or training experience, etc.

Prior to activating an approved license, the following additional items must be received:

- \$200 biennial license fee & \$25 supervisor's certificate fee, (if applicable)
- Current certificate of general liability insurance with the City listed as a certificate holder
- List of payroll trade employees(if applicable) with full name & last four digits of their social security number
- Proof of current worker's compensation insurance (if applicable)
- Exempt Specialized Trade Subcontractor Identification forms (if applicable)

I have read and agree to abide by the requirements contained in the contractor packet. I understand that providing any incorrect or misleading information is grounds for denial of the license requested with no refund of any fees paid and that incomplete applications or project forms will not be accepted. Further, I understand that achieving a passing score on a specific examination does not guarantee approval for a particular license or certificate class without required documentation of experience.

Name of person applying for credential(s)[print] : _____

Signature: _____ Date _____

Below for Office Use Only:

\$75 application fee received	_____	Yes	_____	No	Date _____	Staff Initials _____
\$200 license fee received	_____	Yes	_____	No	Date _____	Staff Initials _____
\$25 certificate fee received	_____	Yes	_____	No	Date _____	Staff Initials _____

Applicant approved for _____	License	_____	_____
Applicant approved for _____	Certificate	_____	_____
	Authorized Signature	_____	Date _____

Comments: _____

Applicant **NOT** approved for License/Cert.: _____

Authorized Signature _____ Date _____

Additional Information Needed: _____

Rcvd. Date _____

Comments: _____

Rcvd. Date _____
