

**TOWN OF ERIE
BUILDING DIVISION**

645 HOLBROOK STREET/P.O. BOX 750 ERIE, CO 80516



Main Phone: (303) 926-2780
Fax #: (303) 926-2704
Email: bldgfx@erieco.gov

APPLICATION FOR CONTRACTOR LICENSING (NEW)

General Information

Company Name _____
Address _____ City/State _____ Zip _____
Phone _____ Fax _____
Contact Person or License Holder _____
Contact E-Mail _____

***Insurance Information**

Insurance Company _____
Name of Agent _____ Phone _____
Policy No. _____ Exp. Date _____

(Please provide a copy with completed submittal.)

License Information

Type of Business: _____

Type of License Requested (select one): Class A Class B Class C Mechanical Concrete & Form
Excavator House/Building Mover Electrical Plumbing

*Electrical State Contractor License # _____ *Electrical Master License # _____

*Plumbing State Contractor License # _____ *Plumbing Master License # _____

(Please provide a copy with completed submittal.)

Contractor Responsibility

I understand that all contractors conducting work within the Town of Erie are required to obtain a Town of Erie Contractor's License and obtain all necessary building permits in accordance with Ordinance No. 486 and No. 639.

I hereby certify that the statements above constitute a part of this application and are true and correct to the best of my knowledge.

Applicant _____ Date _____

For Office Use Only:

LICENSE STATUS [] Approved [] Denied Approved by _____ Date _____
License Type _____ License Number Issued _____ Payment Amount _____
Payment Method [] Cash [] Check Check No. _____