

# City of Aspen & Pitkin County

## CONTRACTOR LICENSE APPLICATION & PLUMBING / ELECTRICAL REGISTRATION

130 S. Galena Street - Aspen, Colorado 81611 - Phone: (970) 920-5090 - Fax: (970) 920-5439 - www.aspenpitkin.com

Name and Complete Mailing Address of Company:

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Office Phone # ( ) \_\_\_\_\_

Fax # ( ) \_\_\_\_\_

Cell Phone # ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of Business Owner / Responsible Party: \_\_\_\_\_

Class of License for which you are applying:

\_\_\_\_\_ General Contractor (Unlimited)  
\_\_\_\_\_ General Contractor (Light Commercial)  
\_\_\_\_\_ General Contractor (Commercial)  
\_\_\_\_\_ General Contractor (Homebuilder)

\_\_\_\_\_ Owner Builder  
\_\_\_\_\_ Electrical Registration  
\_\_\_\_\_ Plumbing Registration  
\_\_\_\_\_ Special\* \_\_\_\_\_

\*See back of page for options

Renewal \_\_\_ (License # \_\_\_\_\_) **OR** New \_\_\_

The undersigned as individual, owner, partner, or corporation officer, certifies that he/she is authorized as applicant or officer and certifies that all information is correct.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

This application must be accompanied by:

1. **Payment of the appropriate fee**, checks made payable to: City of Aspen (See fee schedule on the back of this page)
2. **Insurance Affidavit Form**
3. **State Lawful Presence (HB1023) Affidavit** and supporting documentation (\*\*If you are not applying in person, you must have your signature and identification witnessed by a notary)
4. **A copy of current B.E.S.T. card or STATE card** (front and back) at the level of license you are applying for and valid for the period of time you are licensing for, not the one that has or is about to expire.

### OFFICE USE ONLY

License #: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

License Exp. Date: \_\_\_\_\_ Date: \_\_\_\_\_ Initial: \_\_\_\_\_