



CONTRACTOR LICENSE APPLICATION

Community Development Department
1290 S. Public Road, Lafayette, Colorado 80026

303-661-1451
Email: buildingpermits@lafayetteco.gov

TYPE OF CONTRACTOR

Form with checkboxes for General Contractor (Class A, B, C), Electrical, Mechanical, Plumbing, and Special Contractor (Mobile Home Installer, Concrete and Form, Masonry, etc.).

Form with fields for Business Name, Phone, Fax, Business Mailing Address, Business Type, City, Zip, Applicant Name, Email Address, and Supervisor information.

INSURANCE REQUIREMENTS

Contractors granted a license under the terms of Chapter 30 of the Code of Ordinances for the City of Lafayette, Colorado, are required to maintain Workman's Compensation Insurance at all times during the term of this license.

Insurance Certificate Must Accompany This Application

Form with fields for Workmans' Compensation Company, Liability Company, Insurance Agent, Mailing Address, Policy Number, and Phone Number.

NOTICE TO APPLICANT/LICENSEE

The Licensee shall immediately notify the Building Department of any change in business name, address, or ownership. The City has the authority to revoke or suspend this license if any requirements of the Code are violated.

I certify that the statements made on this application are correct to the best of my knowledge.

Form with fields for Applicant Signature, Title, and Date.

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