

City of Park City 6110 North Hydraulic Park City, KS 67219-2499 316.744.2026 • fax 316.744.3865

Request for Building Contractor License

License Y		Year 2017 Phone Numbers			Date of application
Name:			Phone:		
Address:			Cell Phone:		_
City/State/Zip:			Email:		
BUILDERS LICENSES: Circle 1			Specialty, a separate license and a separate fee shall be	•	
Class A - Unlimited Commercial and/or Residential		+	oofing and/or Siding		ecking
Class B - Three Story or Less		S-2 Sv	vimming Pool	S-6 Agri	cultural Buildings
Class C - 1 & 2 Family Residential		S-3 Fi	re Sprinkler System	S-7 Sign	
Class L - Limited				Class I – Inac	tive
follow-up phone call. There is a \$2.8 APPLICATION; a clerk will call you f	or processing.		WING ARE REC		
Certificate of Insurance	Of the Of The		City, County, ICC or Block L		
Insurance Expiration Date		Expiration Date			
<u> </u>	ificate of Insuranc		County, ICC or Block	c License ha	s expired
,			py with your applic		
The City of Park City recognizes and certificates as proof of qualification be in the best interest of the citizen within the City Limits of Park City and City Municipal Code may have his/h The following individuals are author 1.	s. The City of Park City re s of Park City. By signing nd abide by all laws and c er license privileges revo	sserves the rig this application ordinances. A oked.	ght to refuse to license any on, said Contractor agrees ny Contractor who willfully	person, firm or to submit perm	corporation if it is believed to it applications for projects
(Print Name)		(Sign Nar	ne)		(Date)
2. (Print Name)		(Sign Nar	mal		(Data)
(Print Name)		(Sign ivar	nej		(Date)
No other individuals will be allowed a new authorization form must be rel licensed contractor and must be rel	equested in writing from	your compa	ny on your company letter	head. The form	
			Cla	ss of Licen	se
Licensed Individual Name - please print			GIO.	License	
			New Contracto		
Licensed Individual Signature RE	QUIRED			6 License F	
				тот	