



Town of Johnstown

2021 JOHNSTOWN CONTRACTOR LICENSE

Lic. # _____
Fee: \$ 100.00

GENERAL LICENSING FEE

CONTRACTOR MEANS ANY PERSON, FIRM, PARTNERSHIP, CORPORATION, ASSOCIATION, OTHER ORGANIZATION OR ANY COMBINATION THEREOF, THAT PERFORMS CONSTRUCTION WITH THE TOWN

.....\$100.00 per year

PLEASE TYPE OR PRINT CLEARLY

Business Name: _____ Owner's Name: _____

Business Address: _____
Address City, State, Zip

Mailing Address: _____
Address City, State, Zip

Address of Owner: (if different) _____
Address City, State, Zip

Business Phone: _____ Other Contact Name & Number: _____

Describe in detail the nature of the business: _____

Email Contact: _____

Start Date of Business: _____ Colorado Master License #: _____
(if applicable)

Type of Construction

- | | | |
|---|---|---|
| <input type="checkbox"/> General Contractor | <input type="checkbox"/> Electrical/Solar | <input type="checkbox"/> Heating/Mechanical |
| <input type="checkbox"/> Plumber | <input type="checkbox"/> Roofer | <input type="checkbox"/> Lawn sprinkler/Landscaping |
| <input type="checkbox"/> Fire sprinkler | <input type="checkbox"/> Signage | <input type="checkbox"/> Other |

Number of Employees: Full Time _____ Part Time _____ Seasonal _____


(continue on next page)

The Community That Cares

johnstown.colorado.gov

P: 970.587.4664 | 450 S. Parish Ave, Johnstown CO 80534 | F: 970.587.0141

Contact Person in Case of Emergency:

Name	Address	Phone
 Applicant Signature		Date

**** The license will expire one year after date of issuance, and must be renewed each year. ****

- ***Please provide a copy of all licenses issued by the State of Colorado***
- ***Please provide a copy of Certificate of Liability Insurance***
- ***(SOLE PROPRIETORS ONLY) Included is an affidavit to prove Lawful Presence and a picture ID is required at time of application***
- ***Fill out form completely and include \$100.00 fee payable to the Town of Johnstown***

AFFIDAVIT OF LAWFUL PRESENCE

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

_____ I am a United States Citizen; or

_____ I am a Permanent Resident of the United States; or

_____ I am lawfully present in the United States pursuant to Federal Law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under C.R.S. § 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

Per HB 06S-1023, you must provide a copy of one of the following IDs (please check which one is attached)

_____ Colorado Driver's License

_____ Colorado ID card

_____ Military IDs

_____ Coast Guard mariner document

_____ Native American tribal document