



GARDEN CITY
— KANSAS —
PO Box 998, 301 N 8th Garden City, KS 67846
APPLICATION FOR CONTRACTOR'S LICENSE
Of The Building Trades and Profession

Application is hereby made to the City Commissioners of the City of Garden City, Kansas, for a Contractor's License, as follows:

- Class A General Contractor Class D-P Plumbing with Gas Contractor
 Class B Building Contractor Class D-R Commercial Roofing Contractor
 Class C Residential Contractor Class E-F Fire Sprinkler & Protection Contractor
 D-CO Concrete Contractor Class E-SOC Specialized Other Contractor - Specify E-SOC Sub-Class: _____
 D-E Electrical Contractor Class L Limited Contractor - Specify L Sub-Class: _____
 D-M Mechanical Contractor

Name of business to be shown on license? _____

SS# _____ or Fed ID# _____

Business is: Individual _____ Sole Proprietorship* _____ Partnership _____ Corporation** _____

Other (Specify) _____

List Principals: (Persons with a 5% or greater interest)

Name	Address

Business Address _____ Mailing Address _____
 Address City State Zip Address / PO Box City State Zip

Phone Number _____ E-mail Address _____

How long have you been engaged in such business? _____ How long have you been in business as a contractor? _____

Please attach list of locations where you have worked (jobs completed) during the past 24 months.

Has any bonding company or surety, in the last five years, completed or made financial settlements upon any contract in which you, or any of you, were interested? Yes _____ No _____ (if yes, attach detailed statement).

*Only if operating under a business or fictitious name.
 **Attach copy of Kansas or foreign authority to do business in Kansas.

List debts outstanding and payable to subcontractors which have resulted in any Liens, encumbrances or lawsuits filed against your company.

List any lawsuits engaged in with property owners for service rendered or performed by your company.

Do you have working knowledge of the applicable code? Have you read the section relating to licenses?
 Yes _____ No _____ Yes _____ No _____

THE ABOVE STATEMENTS are true and correct to the best of my, or our knowledge and belief.

Name _____ Title _____
 Name _____ Title _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

My commission Expires _____

 Notary Public

NOTE: An INDIVIDUAL must sign this application personally. A CO-PARTNERSHIP application must be signed and acknowledge by each member. A CORPORATION application must be signed by an officer of the corporation.

Checked by: _____ Date: _____
 Office of Building Official

Checked by: _____ Date: _____
 City Manager

ACTION OF THE CITY COMMISSION

The City Commissioners of the City of Garden City, Having considered this application, so by majority vote recommend that the application be (approved)(denied), and the City Inspector is authorized to (issue)(refuse) the license.

Date: _____
 License No. _____
 Expiration Date of License: _____
 Remarks: _____

ATTEST:

Mayor _____
 City Clerk _____