## APPLICATION FOR CONTRACTOR'S LICENSE OR LICENSE RENEWAL

	NAME OF APPLICANT:	
	BUSINESS ADDRESS:	
	CITY, STATE, ZIPCODE:	
	BUSINESS TELEPHONE:	
	Calendar year for which license is sought, 20 to	_, 20
	Have you been licensed by the District before? (Yes) (No).	
	NOTIFICATION TO APPLICANT:  No application for a Contractor's License will be accepted unless the following ar application:	e attached to the
1.	A \$5,000 License and Permit Bond with North Washington Street Water and Sanitation oblige.	n District to be named the -
2.	A Certificate of Insurance which will indicate that the contractor carries a minimum of combined single limit liability and property damage coverage. Contractor equipment cincluded. A Certificate of Insurance for State Compensation Insurance is also required. License fee (or renewal fee) in the amount of \$50.00.	overage should also be
1.	THE APPLICANT AGREES, IF LICENSED BY THE DISTRICT TO: Comply with all of the terms, provisions, and requirements of the Rules and Regulation Street Water and Sanitation District with respect to laying and maintenance of Water 8 lines and with respect to payment of fees. Repair, at their own cost, any damage to the public water and sewer lines, which is sho	& Sanitary Sewer service
	opening, uncovering, or laying Water and Sanitary Sewer service lines or connecting W service lines to the Public Water and Sewer System.	
3.	License must be approved at the District's Office before the contractor commences we the North Washington Street Water and Sanitation District.	ork on any projects within

(Signature of Applicant)

3.

(Date of Application)

corporation, partnership, company or other similar entity. HB 06S-1023 is not applicable.

Because of Colorado House Bill 06S-1023 (C.R.S. 24-76.5-103), this affidavit is MANDATORY and must be Submitted along with a copy of one of the accepted forms of identification to prove lawful presence in the United States. Colorado law now requires that the North Washington Street Water & San. Dist. verify all natural persons 18 years or older or sole proprietors who are applying for a public benefit are lawfully present in the United States prior to receiving the public benefit. A public benefit includes the application or a renewal of a grant, loan, contract, and professional or commercial licenses provided by an agency of the state or local government.

FOR CORPORATIONS/PARTNERSHIPS/COMPANIES ETC. ONLY

I understand this sworn statement is required because the applicant has applied for a "Public Benefit". I further

The applicant, for whom I am authorized to sign, is NOT a "natural person" or "sole proprietorship", but a

1	nable under the laws of Col	fictitious, or fraudulent statement or r orado.				
Printe	d Name and Title of	Signature of Applicant's	Date			
Applic	ant's Representative	Representative				
Name	of Business					
		OR				
	FOR "	NATURAL PERSONS" OR SOLE PROPRIE	TORS ONLY			
			artnership, company or other similar entity	and		
		submit it with the required documenta				
1. I, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):						
	Colorado that (check one	=);				
I am a United States Citizen: or						
2.	I am a Permanent Res	ident of the United States: or				
_	I am lawfully presen	t in the United States pursuant to Fede	ral Law.			
2. I understand this sworn statement is required by law because I have applied for a "Public Benefit".						
<ol> <li>I understand State law requires me to provide proof that I am lawfully present in the United States prior to receipt of this Public Benefit.</li> </ol>						
4.			ement or representation in this sworn affida	ıvit		
is punishable under the laws of Colorado.  5. I have attached a copy of one of the acceptable documents provided by the State of Colorado and I presente						
3.			ears of age and I am lawfully in the United			
Applica	nt's Printed Name	Applicant's Signature	Date	ŧ		
·/ <del>====</del>	N	ame of Business (If applicable)				