



LICENSE # _____

**MORGAN COUNTY
PLANNING, ZONING & BUILDING DEPT.**

231 Ensign St., P.O. Box 596

Fort Morgan, Colorado 80701

Phone: (970) 542-3526 email: ahill@co.morgan.co.us

CONTRACTOR LICENSING APPLICATION

Annual License Fee \$25.00

Company Information

_____			(____) _____
Business Name			Office Phone
_____			(____) _____
Address			Fax Number
_____	_____	_____	(____) _____
City	State	Zip Code	Cellular Phone
E-mail _____			
<input type="checkbox"/> Individual Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLC or LLP <input type="checkbox"/> Corporation			

Owner Information

_____			Title: _____
Name of: Owner; Registered Agent for Corporation; Manager; or General Partner			
Home Address _____			
_____	_____	_____	
City	State	Zip Code	

I hereby certify that the statements made by myself and constituting a part of this Application are true and correct to the best of my knowledge.

Applicant Signature

Print Name

Date

[License will expire on the same date as liability insurance. Renewal notices and Contractor's License will be sent via e-mail when possible.]

No testing was conducted for issuance of this license.

A list of licensed contractors will be made available to the public upon request.

Please complete page 2

