

**CONTRACTOR LICENSE RENEWAL APPLICATION**

**PLEASE PRINT OR TYPE NEATLY**

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DRIVERS LICENSE #: \_\_\_\_\_ ST: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_

POSITION: \_\_\_\_\_  
(OWNER, SUPERINTENDENT, FOREMAN)

BUSINESS NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

BUSINESS TYPE: \_\_\_\_\_ STATE ID # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

FAX: \_\_\_\_\_ MOBILE: \_\_\_\_\_

LICENSE NO: \_\_\_\_\_ CLASS: \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_

**CHECK THE TYPE OF LICENSE REQUESTED:**

\_\_\_\_\_ Class I General Contractor  
Unlimited  
\$100.00/Yr.

\_\_\_\_\_ Class II Residential Contractor  
Limited to single family, duplex, triplex and  
fourplex \$75.00/Yr.

\_\_\_\_\_ Class III Jobbers  
Limited to nonstructural alteration  
of less than \$5000 in value  
\$50.00/Yr.

\_\_\_\_\_ Class IV Subcontractor  
One trade or group of related trades  
\* **Specify Trade** \* \_\_\_\_\_  
\$50.00/Yr.

\_\_\_\_\_ Class V Utility Contractor  
Construction of water, sewer and drainage systems  
\$100.00/Yr.

**Must the required identification and affidavit be submitted in person?**

Personal appearance is not required but the City of Sterling has instituted procedures for verifying that the person applying for the benefit is the person described in the submitted identification and affidavit which may involve a background check. The City of Sterling does not require the applicant to appear in person or to submit a notarized copy of an authorized identification, that ensures the identification is being produced by the rightful owner of that identification. As long the identification procedures allow verification of lawful presence, the process is likely acceptable under H.B. 1023. Federal guidelines require a public entity to acquire and retain copies of eligibility documentation, H.B. 1023 does not modify that requirement and the City of Sterling must continue to follow the federal requirements.

**SOLE PROPRIETOR’S MUST COMPLETE AND SIGN AFFIDAVIT ON PAGE 3.**

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**PLEASE READ THE FOLLOWING AND SIGN BELOW**

I hereby certify that the statements and information contained on this application are to the best of my knowledge true and accurate. By signing this application you affirm familiarity with the ordinances of the City of Sterling regarding building construction and contractor licensing and agree to perform all work in conformance with the ordinances and within the limits of the license held. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this application is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received. I hereby certify that the statements and information contained on this application are to the best of my knowledge true and accurate.

**\*\*A Drivers License Copy must accompany all applications to ensure identification.\*\***

**\*\*All Classes Must Provide Proof of Insurance.\*\***

**FAILURE TO PROVIDE COPY OF DRIVERS LICENSE & INSURANCE WILL RESULT IN DENIAL OF LICENSE.**

\_\_\_\_\_  
APPLICANTS SIGNATURE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

**DO NOT WRITE BELOW THIS LINE**

**LICENSE NO:** \_\_\_\_\_ **CLASS:** \_\_\_\_\_

**EXPIRES:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**ENTERED:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**AFFIDAVIT**

**Application For:**  
\_\_\_\_\_ **Sole Proprietor – Sign Affidavit**

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 Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**CITY OF STERLING    PUBLIC WORKS DEPARTMENT    CODE ENFORCEMENT DIVISION**  
**PO BOX 4000    421 N. 4TH STREET    STERLING COLORADO 80751**  
**970-522-9700    FAX 970-521-0632**

