



# CITY OF FORT MORGAN CONTRACTOR REGISTRATION APPLICATION

Revised 3/14/2013

710 E. Railroad Avenue • Fort Morgan, CO 80701

Building Inspector: (970) 542-3908 • Administrative Assistant: (970) 542-3907

Fax: (970) 867-3039 • [www.cityoffortmorgan.com](http://www.cityoffortmorgan.com)

**Registration Fees\*** (Fee based on **Quarter Registered**) \*Electricians & Plumbers Exempt from Fees by Colorado State Law

<b>Qtr 1:</b> \$50.00 (Jan 1 - Mar 31)	<b>Qtr 2:</b> \$37.50 (Apr 1 - Jun 30)	<b>Qtr 3:</b> \$25.00 (Jul 1 - Sep 30)	<b>Qtr 4:</b> \$12.50 (Oct 1 - Dec 31)
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**\*All Contractor Registrations expire December 31 of each year regardless of date issued.**

### Contractor Information:

**Business Type:**  Individual  Partnership  LLC or LLP  Corporation  \_\_\_\_\_

**Business Name:** \_\_\_\_\_ **Office Phone:** \_\_\_\_\_

**DBA: (If Applicable)** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Business Street Address:** \_\_\_\_\_ **Office Fax:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Business Email:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(If Different than Business) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Owner:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Owner Address:** \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Owner 2:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Owner 2 Address:** \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Contact Title:**  Owner  Manager  General Partner  Registered Agent  \_\_\_\_\_

### Services Contractor Provides:

- |                                     |  |   |  |
|-------------------------------------|--|---|--|
| <input type="checkbox"/> Carpentry  | <input type="checkbox"/> Fire Alarm Installation     | <input type="checkbox"/> Manufactured Home Installation | <input type="checkbox"/> Sign Installation |
| <input type="checkbox"/> Concrete   | <input type="checkbox"/> Fire Sprinkler Installation | <input type="checkbox"/> Masonry / Stucco               | <input type="checkbox"/> Structural Steel  |
| <input type="checkbox"/> Drywall    | <input type="checkbox"/> General Contractor          | <input type="checkbox"/> Plumbing                       | <input type="checkbox"/> Windows & Doors   |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Grading / Excavation        | <input type="checkbox"/> Roofing                        | <input type="checkbox"/> _____             |
| <input type="checkbox"/> Fence      | <input type="checkbox"/> HVAC                        | <input type="checkbox"/> Siding                         | <input type="checkbox"/> _____             |

### Required Documentation: (All documentation must be received and complete before registration is valid.)

**General Liability Insurance** (Required from All Contractors) \*Certificate may be faxed to the City at (970) 867-3039

\*Certificate of General Liability Insurance with the City of Fort Morgan listed as Certificate Holder as shown below.

**City of Fort Morgan Building Department, PO Box 100, Fort Morgan, CO 80701**

**Lawful Presence Affidavit\*** (Required from All Contractors) \*Pursuant to Colorado Revised Statutes (C.R.S.) 24-76.5-103

\*If not presented and signed in person with a valid ID by the owner or authorized signer, this **must be notarized** and mailed, along with a copy of the owner's or authorized signer's valid ID, as noted on the attached Affidavit.

### Additional Documentation: (Required Based on Contractor Type as Shown Below)

#### Electrical and Plumbing Contractors

Copy of Signed Current State of Colorado Contractor and Master License/Registration Cards

#### Manufactured Home Installation Contractors

Proof as a Registered or Certified Installer for State of Colorado Manufactured Housing Installation Program (MHIP)

#### Fire Systems Contractors (Fire Sprinkler or Fire Alarm Installation)

**Sprinkler:** Current Colo. Fire Suppression Contractor Registration(s) Copy **Alarm:** Current NICET Cert Level III or IV Copy

I understand that I or any agent of my company are responsible for strict conformance to all City of Fort Morgan ordinances and adopted codes, and/or applicable laws of the State of Colorado. Failing to abide by such could result in a summons and/or revocation of my Contractor's License. I understand that I must have a Building Permit prior to commencing any work requiring a permit within the city limits of Fort Morgan and have all required inspections done by a City Inspector.

**Applicant Signature\*** \_\_\_\_\_ **Date** \_\_\_\_\_

*\*Must be signed by Owner, Manager, General Partner, Registered Agent, or Person authorized to sign for Company*

**Printed Name:** \_\_\_\_\_ **Printed Title:** \_\_\_\_\_

<b>Office Use</b>	<b>Date Registered</b>	<b>Amount</b>	<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	<b>Initials:</b> _____	<b>Contractor No:</b> _____
	_____	\$ _____				



# LAWFUL PRESENCE AFFIDAVIT

Pursuant to Colorado Revised Statutes (C.R.S.) 24-76.5-103, all persons eighteen (18) years of age or older shall provide proof that they are lawfully present in the United States prior to receipt of certain public benefits, which include any grant, contract, loan, professional license, or commercial license provided by any agency of State or local government or by appropriated funds of a State or local government.

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of  
(Please Print Name)  
the State of Colorado that

**\*Check only one below**

- \_\_\_\_\_ 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 the State 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

**OFFICE USE ONLY**

Form of ID Presented: \_\_\_\_\_ ID Number: \_\_\_\_\_  
 ID Reviewed By: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_  
 City Staff

***If this affidavit is not presented in person, applicant must submit a notarized copy of this affidavit along with a copy of one of the following forms of authorized identification:***

1. Valid Colorado Driver's License or Identification Card (**Photo must be decipherable**)
2. United States Military Identification or Dependent's Identification Card
3. United States Coast Guard Merchant Mariner Card
4. Native American Tribal Document

Notarized this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, in the State of \_\_\_\_\_,  
County of \_\_\_\_\_, City of \_\_\_\_\_; Notarized Signature  
of \_\_\_\_\_.

\_\_\_\_\_  
Notary's Official Signature

Commission Expiration: \_\_\_\_\_

(Notary Seal)