City of Northglenn
Building Department

11701 Community Center Drive
Northglenn, Colorado 80233
Phone: 303-450-8745
Fax: 303-450-8708

# Application for Plumbing License

**This license will expire December 31, 2010**

**Registration Fee: $__________**

## License Fee Schedule

Contractor Licensing Fees are Pro-rated Quarterly. Use the schedule below to determine appropriate fee.

**Plumbing License**

| | |
|---|---|
| Jan 1 - Mar 31 | $50.00 |
| Apr 1 - Jun 30 | $37.50 |
| Jul 1 - Sep 30 | $25.00 |
| Oct 1 - Dec 31 | $12.50 |

**New License Or Renewal License**

_______New license
_______Renewal: Provide previous license number.___________

******** PROVIDE COPY OF DRIVER'S LICENSE OR PHOTO I.D. FOR MASTER PLUMBER ********
******** PROVIDE COPIES OF STATE MASTER PLUMBER AND CONTRACTOR LICENSES********

Company Name:________________________________________________

Business Address:______________________________________________

City:______________________________State:________Zip Code:___________

Phone:______________________ Fax:___________________________

Contact Name:_________________________________________________

Name of Master Plumber: (attach copy of photo ID)__________________________

Master Plumber License Number:_____________________________________

State Contractor License Number: (attach photocopy)_______________________

Type of Ownership:____Corporation ___Partnership ___Sole Proprietor ___Other

Owner Name:__________________________________________________

Title:_________________________________________________________

Address:______________________________________________________

Phone:______________________ Fax:___________________________

I hereby certify that the statements above constitute a part of this application and are true and correct to the best of my knowledge. I understand that all contractor licenses expire on December 31 of each year.

______________________________ ______________________ ___________
Signature Print Name Date

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**Official Use Only**

Date:_________________By:__________________License Number:_______________

Affidavit: Yes__________ No__________