



PUBLIC WORKS DEPARTMENT - ENGINEERING  
PHONE: 720-898-7640

### MUNICIPAL GENERAL CONTRACTOR'S LICENSE APPLICATION

PLEASE PRINT CLEARLY

In accordance with the "Engineering Code of Standards and Specifications for Design and Construction of Public Improvements" and Chapter 78, Article II of the Code of the City of Arvada, current copy of which (I/WE) have obtained, read and understand, (I/We) DBA (an Individual\_\_\_\_, a Partner-ship \_\_\_\_, a Corporation \_\_\_\_, a Limited Liability Corporation\_\_\_\_) under the name of:

Business Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ 24 Hr. Emergency Number \_\_\_\_\_

ITEMS INCLUDED WITH THIS APPLICATION ARE:

- \_\_\_\_ 1) Affidavit Form
- \_\_\_\_ 2) Statutory Workmen's Compensation Insurance
- \_\_\_\_ 3) Certificate of Liability and Property Damage Insurance on "Accord" Form or approved equal
- \_\_\_\_ 4) \$20,000 Bond on City of Arvada form
- \_\_\_\_ 5) License Fee \$200.00 to be paid by phone, in person or mailed

This application is for a:                      New License \_\_\_\_                      Renewal \_\_\_\_

Applicant has been in business for \_\_\_\_ years, (has never \_\_\_\_), (has\* \_\_\_\_) had a license denied, suspended or revoked and (is presently \_\_\_\_), (has been \_\_\_\_) licensed to perform this type of work with the following municipalities: \*provide a statement of explanation with license application.

\_\_\_\_\_  
\_\_\_\_\_

The following persons are familiar with the applicant's work and may be contacted as references:

NAME	COMPANY	ADDRESS	PHONE

The following individuals, partners or corporate officers are authorized to sign for permits under this license:

\_\_\_\_\_  
\_\_\_\_\_

**The undersigned hereby certifies that the information contained herein is true, under penalty of license denial, suspension, revocation and/or civil/criminal penalties. The undersigned further agrees that, if granted a license to perform work in the City of Arvada, the licensee will have in their possession at work sites at all times, a current copy of the City of Arvada Engineering Code of Standards and Specifications. The licensee shall comply with the regulations contained therein, and shall accept the responsibilities thereto as set forth in the Arvada Municipal Code and the current Engineering Code of Standards and Specifications.**

Signed by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Please send applications to [engineeringpermits@arvada.org](mailto:engineeringpermits@arvada.org)  
License Application Form Feb 2021

# AFFIDAVIT FOR LAWFUL PRESENCE VERIFICATION

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 City of Arvada 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

The applicant, for whom I am authorized to sign, is NOT a “natural person” or “sole proprietorship,” but a corporation, partnership, company or other similar entity. HB 06S-1023 is not applicable.

I understand this sworn statement is required because the applicant has applied for a “Public Benefit.” I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the laws of Colorado.

\_\_\_\_\_  
Printed Name and Title of  
Applicant’s Representative

\_\_\_\_\_  
Signature of Applicant’s  
Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Business

**OR**

## FOR “NATURAL PERSONS” OR SOLE PROPRIETORS ONLY

I am a “natural person” or a “sole proprietorship,” NOT a corporation, partnership, company or other similar entity and MUST complete this affidavit and submit it with the required documentation.

1. 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.

2. I understand this sworn statement is required by law because I have applied for a “Public Benefit.”

3. 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.

4. I acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit 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 presented it to the agency as proof of identification that I am at least 18 years of age and I am lawfully in the United States.

\_\_\_\_\_  
Applicant’s Printed Name

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Business (If applicable)

*Revised 08/01/07*

**ACCEPTED FORMS OF IDENTIFICATION TO  
PROVE LAWFUL PRESENCE IN THE UNITED STATES:**

(1) Valid Colorado Driver's License or valid Colorado Identification card; *or*

(2) United States Military card or a Military Dependent's Identification card; *or*

(3) United States Coast Guard Merchant Mariner Card; *or*

(4) Native American Tribal Card; *or*

(5) In the case of a resident of another state, the driver's license or a state-issued identification card from the state of Alabama, Arizona, Arkansas, California, Connecticut, Delaware, District of Columbia, Florida, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New York, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Virginia, West Virginia, or Wyoming. ; *or*

**Alternative Identification**

If you cannot produce one of the above forms of identification, but can prove that you are lawfully present in the United States, please request a copy of The City of Arvada's Pamphlet outlining the Colorado Department of Revenue's acceptable forms of identification to prove lawful presence.

**Waiver Process**

If you cannot produce any documentation necessary to prove lawful presence, you may request a waiver. (Form DR 4678). The waiver is available for individuals who:

(a) Due to chronic health or medical condition, lack sufficient mobility to appear in person to apply for a Colorado driver's license or Colorado identification card; *or*

(b) Due to lack of a permanent physical address in Colorado, do not qualify for a Colorado driver's license or Colorado identification card; *or*

(c) May lack sufficient documentation to receive a Colorado driver's license or Colorado identification card.

**The waiver and all supporting documentation must be presented by you a representative at a participating Colorado driver's license office, not at the City Department where you are requesting the benefit. Arvada cannot approve the benefit until the waiver process has been completed.**