2025 Contractor License Application

APPLICANT INFORMATION:		
First and Last Name	Email:	Phone
◯ First-time Registration	◯ License / Registration Renewal	◯ Change in Ownership
The Town requires businesses to complete a separate application for obtaining a Special Issuance Business License (B) Peddler and Solicitor License for the Town of Wellington. For additional information regarding solicitation, peddling, and canvassing please visit the Municipal Code ARTICLE 3 - Auctions and Peddling—Canvassing, Soliciting or Peddling		

GENERAL INFORMATION: REQUIRED	
Contractor Company Name:	
Doing Business As:	
I.E.N (Federal Tax ID) Internal Revenue Service | Do I need a Employer ID	Type of Ownership ☐ Sole Proprietor ☐Partnership ☐ LLC ☐Corporation Other:_____
Owner Name	Number:
Primary Contact (Administrative Access in Community Core)	Number:
Primary Contact Email	

Physical Address:		
State:	City/Town	Zip Code
◯ If the Physical address is within Town Limits – In addition to a contractor license/ registration please complete a business license application. For additional information regarding business licensing please email Business.licensing@wellingtoncolorado.gov or visit the Towns website Business Licensing | Wellington, CO		
◯ Check this box if the mailing address is the same as the Physical Address		
Mailing Address:		
State:	City/Town:	Zip Code

CONTRACTOR INFORMATION: SELECT ALL TRADES THAT APPLY TO YOUR COMPANY : REQUIRED			
◯ General Contractor			
◯ Building	◯ State Licensed Plumbing	◯ State Licensed Electrical	◯ Mechanical
◯ Roofing	◯ Roofing and PV Solar Installation	◯ PV Solar Installation W/ State Electrical License	◯ PV Solar Installation W/O State Electrical License
◯ Sign Installation W/ State Electrical License	◯ Sign Installation W/O State Electrical License	◯ Windows / Siding	◯ Landscaping / Fence
◯ State Licensed Demolition	◯ State Licensed Mitigation	◯ Fire	◯ Handymen

ELECTRICAL AND PLUMBING CONTRACTORS ARE REQUIRED TO PROVIDE COPIES OF THEIR STATE-ISSUED LICENSES FOR THE TOWN TO COMPLETE A CONTEMPORANEOUS REVIEW OF THE APPLICATION. IF APPLICABLE		
Plumbing Contractor ◯ State Plumbing Contractor License ◯ State Masters Plumbing License ◯ State ID of the Master Plumber	**Electrical Contractors** ◯ State Electrical Contractor License ◯ State Masters Electrical License ◯ State ID of the Master Electrician	• State Contemporaneous-Reviews-of-Electrical--Plumbing-Licenses • SAFEbuilt Electrical - house-bill-2016-1073 • SAFEbuilt Plumbing - house-bill-2019-1086

DOCUMENTS REQUIRED:

Certificate of Liability Insurance

All applicants must provide a current Certificate of Liability Insurance listing the Town of Wellington as the Certificate Holder.

- ✓ General Liability Insurance minimum limits of $1,000,000.00 per occurrence and $2,000,000.00 aggregate limit.
- ✓ Mailing Address: P.O Box 127 Wellington CO, 80549
- ✓ Email Address: Building@wellingtoncolorado.gov

Scanned copies of State Electrical and Plumbing License if applicable

- ✓ State Masters Electrical and State Electrical Contractor License
- ✓ State Masters Plumbing and State Plumbing Contractor License
- ✓ Drivers ID Associated with each Master License Individual

APPLICANT AGREEMENT: REQUIRED

Contractor hereby agrees that they are responsible for all work performed according to drawings and specifications filed and approved by SAFEbuilt & the Town of Wellington. Contractor shall comply with all the rules, restrictions, and requirements of the towns current adopted Building Codes. The Contractor is to be responsible for all work performed under each contract executed, whether the contractor, an employee or a subcontractor performs the work. Subcontractors listed on specific jobs must obtain their own Town of Wellington Contractor Licenses prior to permit issuance. Contractor will obtain permits prior to any work performed on the project. I hereby confirm that the above and foregoing facts are true to the best of my knowledge and that I will notify the Building Department of any change in my status, company name or address.

Applicant Name (First, Last)	Applicant Signature	Date

COMMUNITY CORE ACCOUNT AUTHORIZED USERS:

First, Last Name:

Email

First, Last Name:

Email

SUBMISSION INSTRUCTION:

ALL THREE PAGES MUST BE RETURNED TO THE TOWN FOR A COMPLETED APPLICATION TO BE PROCESSED FOR REVIEW.

For questions regarding your application, please contact our Building Department at 970-821-5078 or email building@wellingtoncolorado.gov.

- Completed applications to be emailed to Building@wellingtoncolorado.gov
- Mailed to Municipal Services Building P.O. Box 127 Wellington, Colorado 80549
- Delivered to Municipal Services Building at 8225 Third Street, Wellington CO Monday – Thursday 7:30 am – 5:00 pm, Friday 8:00 am – noon.

TURNAROUND TIMES

Contractor Licenses / Registrations are reviewed and processed based on completeness of the application submittal. Incomplete applications will be returned to the applicant to provide additional information needed to complete the review. Pending application completeness, the Town reserves 1-3 business days for processing the license.

Contractors with a physical location operating within Town Limits are required to complete a Business License Application with the Town.
A business license may take up to 30 days to process, however, the majority are processed between 5- 10 business days.

PAYMENT METHODS:

Following application approval, the Town will email an invoice for your license to the applicant email provided on this application.

Payment for your Contractor License can be made the following ways; online in Community Core:

1. By check delivered to The Municipal Services Building at 8225 Third Street Wellington CO, 80549
2. Check payment mailed to P.O. Box 127 Wellington CO 80549
3. Online payment through Community Core, using Xpress Bill Pay

FIRST TIME APPLICANTS PLEASE REVIEW PAGE THREE PRIOR TO SUBMITTING AN APPLICATION TO THE TOWN.	
Are you a LLC, LLP, S or Inc.?	If yes, you are *not required* to complete the Affidavit Section of this application.

Are you a Sole Proprietor?	If yes, complete the Affidavit Section below to comply with the requirements of House Bill 06S-1023.

Lawful Presence Affidavit
(This portion should only be filled out by applicants who are applying as a sole proprietor)

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

☐ I am a legal permanent resident of the United States

☐ I am otherwise lawfully present in United States pursuant to Federal Law.

I understand that this sworn statement is required by law because I have applied for a license or permit or am contracting with the Town, which falls under the definition of 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 18-8503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature	Printed Name	Date:

Subscribed and sworn to before me, the undersigned Notary of Public, this _____ day of _____, 20___

By _____who presented

☐ Colorado Driver's License	☐ Colorado ID Card	☐ Military ID	☐ Passport	☐ Native American Tribal Document

STATE OF COLORADO) ss
COUNTY OF _____)

Notary Public Signature _____

My Commission Expires: _____

(ELECTRONIC DIGITAL NOTARY NOT ACCEPTABLE)