



Town of Pagosa Springs
 551 Hot Springs Boulevard · Post Office Box 1859 · Pagosa Springs, CO 81147
 Phone: 970.264.4151 · Fax: 970.264.4634

Department of Building and Fire Safety Contractor Work Permit

Return Completed Application to the Department of Building and Fire Safety with your Fee and Certificate of Insurance for processing. Processing time varies but can take up to 14 days to receive license

Business /Owner Information				
Business Legal Name		FEIN:		
DBA(Doing Business As):				
Physical Address:				
Mailing Address:				
Email:		No. of Employees:		
Cell:	Business:	Home:		
Owner Name:				
Primary Contact (PC):			PC Position:	
Phone Number:				
Describe your Business:				
Type of Ownership:	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Franchise <input type="checkbox"/> Non-Profit Corp. (provide proof of status) <input type="checkbox"/> Other _____	
DORA License Type:		DORA License #:	Exp:	
Other License Type:		Other License Type:	Exp:	

Class A	Class B	Class C
Construction, alteration or repair of any type of commercial permitted structure. Required for ALL Commercial & Multi Family General Contractors	Construction, alteration or repair of single or two-family residences of two stories or less. Required for ALL Residential General Contractors	Contracting for labor or labor and material involving specialized trades. Required for ALL Subcontractors
Annual Fee		
\$150.00	\$100.00	\$50.00
Date Paid: _____ Payment Type: Credit Card _____ Check _____ Cash _____		
Required Limits of Insurance		
Current Certificates of Liability and Workers Compensation Insurance are required in the following liability amounts		
Class A or B Permittee must have liability limits of at least: <ul style="list-style-type: none"> • \$300,000.00 per individual • \$300,000.00 per occurrence • \$50,000 for property damage 	Class C Permittee must have liability of at least: <ul style="list-style-type: none"> • \$50,000.00 per individual • \$100,000.00 per occurrence • \$25,000.00 for property damage 	

Business Name: _____ License No.: _____

If Business is Physically Located in Town Limits			
Landlord Name:			
Landlord Mailing Address:			
Property Owner Association:		Year business moved to location:	
Is your business a change of use/ occupancy for this location?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	For business located within the Town limits. What is the square footage of your business space: _____ sq ft.
Will there be ANY remodeling or building alterations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does business utilize any hazardous, toxic, or flammable materials?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Will you be installing a new sign or changing an existing sign?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, have you applied for a sign permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

As the representative for this company,

- I fully understand and have read the Permittee responsibilities (attached) and understand that the full Municipal Code requiring Contractors Work Permits is available at www.townofpagosaprsrings.com or at Town Hall.
- I understand an approved, current and issued Contractors Work Permit and Business license is required to conduct business within the Town of Pagosa Springs.
- I fully understand and will comply with all the rules and regulations of the Town of Pagosa Springs Municipal Code.
- I have attached a valid Certificate of Insurance to this application.
This application is complete and correct to the best of my knowledge.

Applicant's Name (printed)

Applicant's Signature

Date

