

Commercial Contractor License Application Form

Please complete all sections below and submit all required documentation for consideration of your commercial contractor license.

1. Applicant Information

Business Name

Owner/Principal Name

Business Address

Phone Number

Email Address

2. License Details

License Type

 -- Select --

Years of Relevant Experience

List Professional Qualifications/Certifications

3. Project & Compliance Information

List of Recent Commercial Projects

 Include project names, locations, and brief descriptions

Proof of Liability Insurance Provided

 -- Select --

4. Legal Compliance

Have you, your business, or any principal ever been convicted of a felony or had a license revoked?

 -- Select --

Other Compliance (e.g., bonding, workers' comp)

I hereby certify that the information provided is true and correct to the best of my knowledge and understand that any false

statement may result in denial or revocation of my license.

Applicant Signature

Date

Submit Application