



FRONT RANGE FIRE RESCUE

Application for Contractor Licensing

P.O. Box 130, Milliken, CO 80543



DATE OF REQUEST: _____ FORM RECEIVED BY: _____

NAME OF APPLICANT: _____

CELL PHONE: _____ EMAIL: _____

BUSINESS NAME: _____

BUSINESS STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

TYPE OF LICENSE APPLYING FOR (CHOOSE ONLY ONE)

Fire Alarm Systems

Fire Suppression Systems

Fire Alarm/Electrical licenses, certificates and/or registrations previously or currently held in other jurisdictions. Applicant must include copies of NICET certification, factory fire alarm certificates, State of Colorado registrations, etc. with application.

Class of License	Years (From/To)	City & Phone	License #

Have you ever had a license/registration revoked or denied? Yes No

If yes, provide details: _____

List previous construction work history that applies to license being applied for, or provide a full resume:

List below any persons you authorize to receive permits and sign documents under your license:

1.	4.
2.	5.
3.	6.

List three (3) references who have knowledge of your ability to perform the tasks associated with the type of license for which you are applying.

Company Name: _____

Contact Person: _____ Phone: _____

Company Name: _____

Contact Person: _____ Phone: _____

Company Name: _____

Contact Person: _____ Phone: _____

The undersigned Applicant affirms familiarity with the ordinances and regulations of Front Range Fire Rescue (FRFR) and hereby authorizes FRFR to contact and make inquiries of all persons having knowledge of the Applicant's professional abilities. Statements made in this application are subject to verification. By signing below, express approval is granted to FRFR to contact and make inquiries of all persons having knowledge of the Applicant's professional abilities. False and/or misleading statements may be cause for disapproval of this application, and may be grounds for revocation of any license that may have been issued pursuant to false and/or misleading statements.

SIGNATURE OF APPLICANT: _____

Information that must be attached to completed application:

1. Application must be completed legibly and signed
2. Original signed Affidavit (faxes are not acceptable)
3. Copy of valid identification
4. Copy of all associated certifications and/or registrations
5. Submittal of Application fee: \$100 for 2 years

FRONT RANGE FIRE RESCUE USE ONLY

Completed Application Received: _____

FRFR License # Issued:

Signed Affidavit Received: _____

Copy of ID / Registration Received: _____

Application Fee Received: _____

FRFR LICENSE STATUS:

Approved

Conditional/Provisional

Denied

Status authorized by: _____ Date: _____

Notes/Comments: _____

AFFIDAVIT PURSUANT TO 24,76.5-103, § C.R.S.

This affidavit must be completed, signed, and included with the completed Application. Attach a photocopy of the front and back of one of the following forms of identification: a valid Colorado driver’s license or identification card, a United States military card of military dependent identification card, a United States Coast Guard Merchant Mariner identification card, or a Native American tribal document.

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
(Valid identification must be provided)

- _____ I am a legal permanent resident of the United States, or
(Valid identification must be provided)

- _____ I am lawfully present in the United States pursuant to federal law.
(Valid identification and alien registration documentation must be provided)

I understand that this sworn statement is required by law because I have applied for 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 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Applicant Signature

Date

INTERNAL USE ONLY	Valid forms of identification
<input type="checkbox"/>	- Current Colorado driver’s license, minor driver’s license, probationary driver’s license, commercial driver’s license, restricted driver’s license, instructional permit
<input type="checkbox"/>	- Current Colorado identification card
<input type="checkbox"/>	- US military card or dependent identification card
<input type="checkbox"/>	- US Coast Guard Merchant Mariner card
<input type="checkbox"/>	- Native American tribal document
The following additional forms of identification are valid per Department of Revenue regulations*	
<input type="checkbox"/>	- Certificate verifying naturalized status by the United States with photo and raised seal
<input type="checkbox"/>	- Certificate verifying US citizenship by the United States with photo and raised seal, e.g., US passport
<input type="checkbox"/>	- Valid driver’s license from any state of the United States or the District of Columbia, excluding AK, HI, IL, MD, MI, NE, NM, NC, OR, TN, TX, UT, VT and WI
<input type="checkbox"/>	- Valid immigration documents indicating lawful presence, e.g., current foreign passport with current I-551 stamp or visa, current foreign passport with I-94, I-94 with asylum status, unexpired Resident Alien card, Permanent Resident card, or Employment Authorization card
*A waiver may be available where no identification exists or can be obtained due to a medical condition, homelessness, or insufficient documentation to receive a Colorado ID or driver’s license. Contact your department director.	