

# Pikes Peak REGIONAL Building Department

## Electrical Contractor Registration

### REGISTRATION REQUIREMENTS (include copies with this registration)

- A non-refundable \$50 application/processing fee is due at the time the application is submitted.

\*The fee is payable by cash, check, or credit card.

- Colorado Master Electrician License (*electronic wallet cards for both the individual and business will be sufficient*)
- Liability Insurance Certificate
- Workers' Compensation Certificate
- Copy of Driver License or Photo ID issued by a state or federal government

RBD USE ONLY	
Date:	_____
Initials:	_____
Receipt #	_____
RBD #	_____

### Business Information

Type of Entity (*Check one*)     Individual     Partnership     Corporation     LLC     Other

Business Name: \_\_\_\_\_

(DBAs): \_\_\_\_\_

*(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate including DBAs. The business name must match exactly the name on file with the Colorado Secretary of State, or a letter must be submitted stating which business name(s) will be used within the jurisdiction of PPRBD.)*

Federal Employer ID: (if any) \_\_\_\_\_

Business Address: \_\_\_\_\_

*Street Address (and P. O. Box, if applicable)*

*Apt./Unit #*

*City*

*State*

*Zip Code*

Business Phone: \_\_\_\_\_ Business E-Mail: \_\_\_\_\_

Business Fax: \_\_\_\_\_ Business Website: \_\_\_\_\_

Company's Principals or Owners:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

# Electrical Contractor Registration

## Applicant's Information

Applicant's Name: \_\_\_\_\_  
*Last First M.I. Suffix*

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
*Apt./Unit #*  
\_\_\_\_\_  
*Number / Street Only - No P. O. Boxes or PBM's*  
\_\_\_\_\_  
*City State Zip Code*

Applicant's Home Phone: \_\_\_\_\_ Applicant's Cell Phone: \_\_\_\_\_

Applicant's Office Phone: \_\_\_\_\_ Applicant's Fax: \_\_\_\_\_

Applicant's E-mail Address: \_\_\_\_\_

Have you been accused of, charged, or liable for any claims (civil, criminal, or administrative) for work related to any license or registration issued by this jurisdiction or for work related to the building trades in any jurisdiction?

Yes  No If yes, explain:

\_\_\_\_\_

### CERTIFICATION (The following declaration is to be signed by the Applicant)

PPRBD requires all persons seeking a license to undergo a name-based judicial record check. I hereby authorize PPRBD to perform a name-based judicial record check utilizing information provided in this application. I agree and understand PPRBD may deny me a license after such review in accordance with the Regional Building Code and applicable statutory requirements. If any information provided in this application is untrue, the license granted to me may be automatically revoked by PPRBD in accordance with the Regional Building Code and applicable statutory requirements thereto. (See attached Privacy Act Statement)

Applicant's Printed Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## PRIVACY ACT STATEMENT

### Privacy Act Statement

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of the following concerning the collection of the information on this form.

#### **A. AUTHORITY:**

Collection of the information solicited on this form is authorized by Title 24 of the Colorado Revised Statutes (C.R.S.), whether or not codified. In general, see C.R.S. §§ 24-5-101, 24-50-1001 *et al.*, 24-72-301, *et al.*, including, but not limited to 24-72-305.4, 24-60-2702. For licensing, certification, or registration functions for any governmental entity, in addition to other authority conferred by law, specifically refer to C.R.S. § 24-72-305.4. For contemplated employment for certain positions with Pikes Peak Regional Building Department where confidential financial and personally identifiable information, as such is regulated by Titles 6 and 24 of C.R.S., may readily be available to a person, the information solicited by the Department is a requirement/condition to employment.

#### **B. PURPOSE:**

The primary purpose for soliciting this information is to determine the eligibility of, and whether there exists a law enforcement or security risk in permitting licensing, certification, or registration, or employment, as applicable.

#### **C. ROUTINE USES:**

The information solicited on this form may be made available as a "routine use" to other government agencies to assist the Department in making determinations about the person's eligibility for licensing, certification, or registration, as applicable, for administration purposes. The information may be made available to the State of Colorado (specific to any licensing, certification, or registration regulated by it) in the event an application is not approved, so that a determination can be made for issuance thereof.

#### **D. CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:**

Licensing, certification, or registration by the Department may not be issued, or consideration for/an offer of employment with the Department, as applicable, may be terminated by the Department.