GENERAL CONTRACTORS LICENSE APPLICATION

NAME:
BUSINESS ADDRESS:
CITY,STATE,ZIP CODE:
TELEPHONE NUMBER:CONTRACTOR'S LIABILITY INSURANCE CARRIER:
AMOUNT OF INSURANCE CARRIED: Personal Injury Amount:
Property Damage Amount:
The following is a complete and accurate list of all of the trades I will advertise or offer for service in the City of St. John. (List all trades applicant intends on practicing in detail, e.g. carpentry, painting, HVAC electrical, plumbing, pipe fitting, roofing, siding, etc.)
State of Kansas) County of Stafford) SS:
I herby state that I am familiar with the Uniform Building Code as it is adopted by the City of St. John Kansas, and further state that I will follow the building code to the best of my ability as it applies to an particular trade I have listed above as it pertains to any construction performed within the City of St. John Kansas. I further state that the liability insurance information is complete and accurate and that I am it compliance with the Kansas Workmen's Compensation law as enacted by the State of Kansas.
Affiant
Subscribed to and sworn to before me this day of,
Notary Public
My appointment expires .