



# CITY OF DERBY GENERAL CONTRACTOR LICENSE APPLICATION

Date: \_\_\_\_\_

**Documentation Necessary for Processing**

1. Certificate of Insurance issued to City of Derby - \$500,000
2. Photo ID of License Holder
3. Completed Application
4. Appropriate Fee
5. Copy of Appropriate Contractor License

**Type of License:**     Class A \$250     Class B \$250     Class C \$200     Class D \$70

**INSURANCE REQUIRED:** *-\$500,000 minimum-General liability and workers compensation.*

The undersigned shall make application to the City of Derby for the license listed above. The required fee shall accompany this application when submitted for approval. The undersigned hereby certifies that the answers and statement herein are true and correct to the best of their knowledge and belief.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone or Pager Number: \_\_\_\_\_

Company: \_\_\_\_\_

**Qualifications**

*Holds license with Wichita and/or Sedgwick County*

*Or successfully passed ICC test (please attach a copy of passing notification)*

Testing agency: \_\_\_\_\_ Exam date: \_\_\_\_\_ Exam passed \_\_\_\_\_

Score: \_\_\_\_\_

Have you ever applied for a Derby Certificate or License before?  YES  NO

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Approved By

Revised 9-2010 (users/code-enf/apps/license)