



**CITY OF DERBY  
LAWN SPRINKLER CONTRACTOR LICENSE APPLICATION**

Date of Application: \_\_\_\_\_

License Fee: **\$ 60.00**

- Documentation Necessary for Processing:**
1. Cert. of Insurance issued to City of Derby - \$500,000
  2. Photo ID of License Holder
  3. Application Fee
  4. Completed Application

**INSURANCE REQUIRED-\$500,000 minimum**

The undersigned 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 #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Fax #: \_\_\_\_\_

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

**Qualifications**

Must provide proof of Kansas department of health backflow tester certification

License number: \_\_\_\_\_ Expiration: \_\_\_\_\_

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

\_\_\_\_\_  
Applicants signature

\_\_\_\_\_  
Approved By  
Revised 9-2010 (users/code-enf/apps/license)