



fort collins contractor licensing

281 N. College Ave., P.O. Box 580; Fort Collins, CO 80522-0580; Voice: 970 221 6767 FAX: 970 224 6134

GENERAL CONTRACTOR PROJECT VERIFICATION FORM

The applicant identified below has applied for a general contractor license or construction supervisor certificate with the City of Fort Collins. Regulations require verification of the applicant's construction experience on specific projects by someone other than applicant or anyone affiliated with applicant's company. You have been identified by the applicant as a person having direct knowledge of the applicant's involvement in the construction project described below. Incorrect or misleading information can result in the applicant's disqualification. You may be contacted for additional details and to verify the information provided. Incomplete forms will not be accepted.

APPLICANT NAME: _____

PROJECT NAME: _____

PROJECT IDENTIFICATION (street address, city, county, state): _____

PERMIT NUMBER: _____ COMPLETION DATE: _____

(Must attach copies of the permit and C/O or final inspection documentation or will be considered incomplete)

PROJECT SCOPE: New Building Addition Structural Alteration Non-structural Interior Finish

STRUCTURAL FRAME TYPE: Std. Wood Frame Heavy Timber Masonry Steel Concrete

BUILDING USE(s): _____

FLOOR AREA OF CONSTRUCTION (SQ FT): _____ FLOORS ABOVE GRADE: _____

CONTRACT VALUE (Building(s) only + Labor + materials + profit): _____

PROJECT DESCRIPTION (Attach supplemental documents as needed): _____

ASPECTS OF PROJECT FOR WHICH APPLICANT WAS DIRECTLY RESPONSIBLE: _____

APPLICANT'S PRIMARY ROLE IN PROJECT: _____
