



BUILDING INSPECTION DEPARTMENT

970.668.3170 ph | 970.668.4255 f
www.SummitCountyCO.gov
Permits@SummitCountyCO.gov

0037 Peak One Dr. | PO Box 5660
Frisco, CO 80443

TO RENEW YOUR REGISTRATION OR REGISTER AS A CONTRACTOR:

1. Registration forms and payment may be may faxed, mailed or emailed to permits@SummitCountyCo.gov. We accept cash, check, credit card and bank draft authorization by using the credit card/bank draft authorization form. This form will be shredded after payment has been received.
2. A Certificate of General Liability Insurance must be provided to the Building Department at the time of registration. This certificate of insurance must show Summit County Building Department listed as the certificate holder. Certificates must also show policy numbers, effective dates, expiration dates and minimum limits of \$300,000 General Liability Insurance.
3. Pay the registration fee. Cash, check, credit card or bank account draft authorization.
4. List people on the last page of the application who are allowed to pull permits. These names are company employees only. Name of person turning in this paperwork must be on the list. This person must be an employee of the company, not the homeowner.
5. Person turning in application for the contractor registration must present a photo I.D.
6. ******Registration renewal fees are \$50 from Dec 1st, through January 31st only. Any renewal received after January 31, will be subject to \$100 annual registration fee.******

FOR PLUMBERS & ELECTRICIANS:

1. Plumbers and Electricians are required to show their up-to-date Master's License and their State Contractor's License from the *State of Colorado* along with their photo I.D. as well as complete the application.

FOR ALTERNATIVE ENERGY CONTRACTORS:

2. **Alternative Energy Contractors are required to provide proof of being a NABCEP Certified PV Installer.** They are also required to be registered with the Summit County Building Department.

CONTRACTOR REGISTRATION APPLICATION

DATE _____

*** PLEASE CHECK WHAT TYPE OF CONTRACTOR YOU ARE REGISTERING AS ***

	INITIAL FEE	RENEWAL FEE
____ GENERAL CONTRACTOR	\$100.00	\$50.00 Dec 1- Jan 31 Only
____ MECHANICAL CONTRACTOR	\$100.00	\$50.00 Dec 1- Jan 31 Only
____ PLUMBING CONTRACTOR	NO FEES	NO FEES
____ ELECTRICAL CONTRACTORS	NO FEES	NO FEES
____ ALTERNATIVE ENERGY CONTR.	\$100.00	\$50.00 Dec 1- Jan 31 Only

1. **COMPANY INFORMATION:**

COMPANY NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE # (____) ____ - _____

PHYSICAL ADDRESS _____

CITY _____ STATE _____ ZIP _____

e-mail address _____

FAX# _____ MOBILE# _____

2. **OWNER/PRESIDENT OF COMPANY:**

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE # (____) ____ - _____

- A. I further certify that if I terminate my association with this company, or for any reason cease to be the qualifying party, I will notify the Summit County Building Inspection division of this fact, in writing, within 30 days.
- B. I agree to furnish the building department with a picture I.D. Of the registration applicant at the time of application.
- C. I understand that the building department may require photo identification from all parties who are authorized to obtain permits under this registration/license.
- D. I understand that registrations for all general contractors, sub-contractors and mechanical contractors expire on December 31st of the year the registration was issued.
- E. **Electrical and plumbing contractors' registrations will expire on the same date that their state license expires.**
- F. **Alternative energy contractors' registrations will expire on the same date their NABCEP certification expires.**

Applicant Signature _____

Printed Name _____

APPROVED PERSONNEL FOR SIGNING PERMITS

The following people employed by the above named company have permission to sign for all applicable permits. Only the people listed will be allowed to pull permits.

PRINT NAME

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____



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Credit Card/eCheck Authorization Form

Sign and complete this form to authorize Summit County Government to make a one-time charge to your credit card or payment with an eCheck listed below.

By signing this form, you give Summit County Government permission to debit your account for the amount indicated on or after the authorization date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

I _____ authorize Summit County Government to charge my
(Cardholder's Full Name)

credit card account indicated below for technical permit or window permit fees.

This payment is for _____
(Site Address)

Billing Information

Phone # _____ Email _____

Card Details (Please note Credit Card Fee 75 cents plus 2.25%)

Visa MasterCard Discover American Express

Cardholder Name _____
Account/CC Number _____
Expiration Date ____ / ____
CVV ____

Banking Information for eCheck Payment (\$1 fee)

Name on Account _____
Routing Number _____

Account Number _____ Checking Savings

I authorize Summit County Government to withdraw from account indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one (1) time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____ DATE _____

Please send authorization form via secure email or fax (970) 668-4255