



TOWN OF WRIGHT
P.O. Box 70, Wright, WY 82732
395 Lariat Way.
Telephone: 307-464-1666
Facsimile: 307-464-0813
paula@wrightwyoming.com

ADMINISTRATIVE USE ONLY:
APPROVED DENIED

License # _____

CONTRACTOR LICENSE APPLICATION

Please complete each field; insert N/A if not applicable. Incomplete applications will not be processed.

DATE OF APPLICATION: ___/___/___

TYPE OF APPLICATION (Select one):

New (Check here if application is for an expired license)

Renewal of contractor's license # _____, having expiration date of ___/___/___

APPLICANT CONTACT INFORMATION

Business Name: _____
Mailing Address: _____ City _____ State _____ Zip Code _____
Physical Address: _____ City _____ State _____ Zip Code _____
Contact Person: _____ Title: _____
Federal Tax ID (SSN for Sole Proprietorship): _____
Office Telephone: _____ Office Facsimile: _____
Other Phone: _____ Email Address: _____
Contact Name/Phone: _____ Contact Name/Phone: _____

Requirements which must be included with application.

- Completed & Notarized Application
Three (3) Notarized Contractor Experience Verifications
Letter of Financial Standing on official letter head
Workers Compensation & Unemployment Letter from State on official letterhead
Wyoming State Contractor's License testing
Certificate of Liability Insurance

Every contractor granted a license of any kind under the terms hereof shall be required to maintain at all times public liability insurance of a minimum amount of not less than \$1,000,000.00

CLASS OF LICENSE (select one):

Building Contractor- Class A - This license shall entitle the holder thereof to contract for the construction, alteration, or repair of any type or size of structure permitted by the building codes of the Town of Wright.

FEES

License Fee - \$75.00
Renewal - 15.00

Building Contractors Class B – This license shall entitle the holder thereof to contract for the construction, alteration, or repair of 1, 2, 3, or 4- Family Residential Buildings of two (2) stories or less and/or one (1) story commercial Buildings with five (5) thousand square total feet area or less; provided that contractors holding Class B Licenses shall not contract for public buildings or places of public assembly.

FEES

License Fee - \$50.00
Renewal - 15.00

Building Contractors Class C – All other contractors not included within categories Class A, Class B, and Class D, who build, alter, add-to, move or demolish any portion of any building or any portion thereof, or structures, including specifically but not limited to house repair maintenance, siding applications, tile laying, carpet laying, plastering, sheetrock installation, painting, fencing, residential roofing, and any other activities involved in maintenance, improvement, or construction of additions to residences and buildings with the Town of Wright. This section will include all specialized contractors who are not licensed under other sections hereof.

FEES

License Fee - \$25.00
Renewal - 15.00

Building Contractor Class D – This class includes all plumbing, electrical, mechanical, sheet metal, commercial roofing contractors, gas, water and sewer, pipe layer licensed contractors, roofing contractors, and mechanical contractors.

FEES

License Fee - \$75.00
Renewal - 15.00

Individual License Fees

ELECTRICAL

Master \$25.00 – Renewal \$15.00
Journeyman 15.00 – Renewal 15.00
Apprentice 5.00 – Renewal 5.00

PLUMBING

Master \$25.00 - Renewal \$15.00
Journeyman 15.00 – Renewal 15.00
Apprentice 5.00 – Renewal 5.00
Pipe layer 5.00 – Renewal 5.00
(Pipe layer includes, gas, water & sewer)

TYPE OF BUSINESS ENTITY (Select one):

- Corporation
- Limited Liability Company
- Limited Partnership
- General Partnership
- Sole Proprietorship
- Other _____

LIST THE NAME AND TITLE OF EVERY OWNER

(Officer, member, partner, sole proprietor, etc.)

EMPLOYEES: Employees that are not or will be working in the Town limits: (select one)

No, applicant does not now have employees, and will not have employees in the future.

Applicant does not now have employees, but may have employees in the future.

Yes, applicant has employees from Wyoming and/or out-of-state

Please Include a photo ID of each employee

List names of employees

STATUS QUESTIONS

* Please answer each of the following questions. * When responding to Questions #4 through #11: If “Yes” and (a) the application is a renewal, (b) the situation occurred during a previous licensing period, and (c) no new event of this nature has occurred since the license was last approved, check the box indicating “Renewing, no change”. Otherwise, attach a separate sheet of paper providing a detailed description of the circumstances surrounding the event. And attach copies of relevant paperwork, including Court documents, as needed.

		Yes	No
1.	Is applicant at least 18 years of age?	[]	[]
2.	Is applicant a U.S. citizen, a U.S. national, or an alien authorized to work in the United States?	[]	[]
3.	Has applicant been previously licensed with the Town of Wright? If “yes”, please specify dates and classes of licenses & business name with whom you were licensed with.	[]	[]
4.	Has applicant or any individual employed by applicant had a contractor license or professional or vocational license denied, fined, suspended, or revoked? Renewal, no change (see criteria above).	[]	[]
5.	Has a third party had to complete or make a financial settlement upon any contract or work undertaken by applicant? Renewal, no change (see criteria above).	[]	[]
6.	Does applicant have any bills past due or any claims for labor, materials, or services outstanding and unsatisfied? Renewal, no change (see criteria above).	[]	[]
7.	Are there any liens, lawsuits, or judgments of record pending against applicant? Renewal, no change (see criteria above).	[]	[]
8.	Is applicant currently in bankruptcy proceedings or has applicant been adjudicated as bankrupt within the past seven (7) years? Renewal, no change (see criteria above).	[]	[]



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Contractor:
Address:
Telephone:

CONTRACTOR EXPERIENCE VERIFICATION

INSTRUCTIONS: Applicant shall fill-in contractor information in upper right corner. Person providing reference shall complete from here down, including having signature notarized form is completed.

WHO MAY PROVIDE REFERENCE: This experience verification form shall be completed by a previous customer or former employee of the contractor, by a member of the building safety department, or by a person engaged in one of the following occupation classifications: architect, engineer, or licensed contractor. Persons related to, affiliated with, or presently employed by the contractor may NOT provide experience verification.

Name of Reference: Telephone:
Title: Organization:
Mailing Address:

- 1. Name of contractor for whom you are verifying work:
2. Length of time you have personally or professionally known contractor: years, months
3. Indicate the type(s) of work contractor has completed for you or to your knowledge:
4. List projects or jobs which you have personal knowledge that contractor has completed:
5. List projects or jobs which you have personal knowledge that the contractor has failed to complete:
6. Describe the contractor's overall performance and ability to meet customer's needs:

AFFIDAVIT OF REFERENCE

I, the undersigned, being first duly sworn, certify that the statements made above are true, and acknowledge that any false, deceptive, or fraudulent statements may subject me to charges of false swearing or perjury.

Date:
Signature of Reference

STATE OF
COUNTY OF

On this day of, 20, the above and foregoing was subscribed and sworn to before me, by (print name of reference), whom I know personally or whose identity was proved to me on the basis of satisfactory evidence.

Witness my hand and official seal.

Notary Public

My commission expires:



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