

**GRANT WATER AND SANITATION DISTRICT
APPLICATION FOR LICENSE FOR CONTRACTORS**

DATE _____

In compliance with the Rules and Regulations of the Grant Water & Sanitation District, I hereby make application for a license authorizing me to engage in the business of contractor, as defined in the Rules and Regulations of Grant Water & Sanitation District. In support of this application, make the following statements.

NAME: _____

BUSINESS ADDRESS _____

PHONE _____ FAX _____

E-MAIL _____

WEBSITE _____

NUMBER OF YEARS IN BUSINESS _____

STATE LICENSE NUMBER(S) _____

INSURANCE REQUIREMENTS: Agree to file Certificate of Insurance for Worker's Compensation and Liability.

Application must be accompanied by a \$30 application fee. A renewal of \$15 per calendar year required to keep license current. If license is granted, I hereby agree to comply with all the Rules and Regulations of the Grant Water & Sanitation District, a copy of which I have received at this date.

Signature of Applicant: _____

Title: _____

Approved: _____ Date: _____

District Engineer