

Contractor License Application

IMPORTANT INFORMATION

The Building Safety Division of the Lawrence Planning & Development Services Department administers the City's contractor licensing and tradesperson licensing programs. Additional information regarding contractor licensing, tradesperson licensing, building/trade permitting, building/trade permit inspections, and pertinent City codes can be obtained on the City's website at <http://www.lawrenceks.org/pds/building-safety> or by contacting the Building Safety Division at (785) 832-7700. Before you submit your application, follow these instructions:

1. Fill out all applicable information. Incomplete applications will be returned.
2. Application will require notarized signatures. Planning and Development Services will notarize application at no charge in office.
3. Include qualifying document (see page 2 for detailed information).
4. Include current Certificate of Insurance listing City of Lawrence as certificate holder (see page 7 for detailed information).
5. Email, fax, mail, or bring completed application and supporting documents to Planning and Development Services:

1 Riverfront Plaza, Suite 320
Office (785) 832-7700
Fax (785) 832-3110
Email buildinginspections@lawrenceks.org

6. Payment will be collected once application has been approved. Planning and Development Services does not accept American Express.

Fees

- \$65.00 Application Fee + \$65.00 License Fee = \$130.00 initial license fee
- Change of Qualifying Party (application fee only)
- Additional Qualifying Party (application fee only)
- **Provide valid State or Federally issued identification**

All licenses must be renewed by December 31st to avoid late fees. The Qualifying Individual for a contractor license must obtain at least eight (8) hours of related continuing education annually, which meet the City's criteria for approval. **Online programs are not accepted for continuing education for the purpose of license renewal.**

Please Note: If you have previously held a Contractor License with City of Lawrence that has been expired for more than 1 year, approved continuing education hours will be required for each year that the license has been expired. Please contact the Planning and Development Services office for more information.

Qualifications for Class A, B, C, D, E, or L Contractor:

Contractor applicants for **A, B, C, or D License** shall satisfy one or more of the following provisions:

- a) Obtain a certified test score of 75% or higher from a nationally-recognized testing institution as contemplated by K.S.A. 12-1556; Standard examinations for the determination of competency of general contractors, as promulgated or administered, or both, by the International Code Council (ICC) or by Prometric (Proof of successful completion of the appropriate certification exam must accompany the contractor license application); or
- b) Hold a bachelor's degree in engineering, architecture, or construction science from an accredited college or university. Landscape Architecture degrees do not qualify. An official transcript, or copy of degree, establishes proof of degree qualification; or
- c) Hold a current Johnson County Contractor License in the same category; and
- d) Applicants for Class D Roofing licenses requires a roofing contractor registration certificate from the Kansas Attorney General and shall provide current registration number on application.

Contractor applications for **E License** shall satisfy the following provision:

- a) Obtain a certified test score of 75% or higher from a nationally-recognized testing institution as contemplated by K.S.A. 12-1508 (Plumbing Contractor), K.S.A. 12-1525 (Electrical Contractor), and K.S.A. 12-1541 (Heating, Ventilation, and Air Conditioning Contractor). Standard examination agencies are defined as the International Code Council (ICC), the International Association of Plumbing and Mechanical Officials (IAPMO), and Prometric or past subsidiaries of Educational Testing Services (ETS). For Mechanical and Electrical type licenses, the required certifications are Master Electrician, Master Mechanic, and Master Plumber with Gas for each respective trade. Proof of successful completion of the appropriate certification exam must accompany the contractor license application; or
- b) Hold a current Johnson County Contractor License in the same category.

Contractor applicants for **L License** shall satisfy the following provision:

- a) Provide credentials to demonstrate appropriate knowledge and ability to perform specialized work for which the license is requested.

Disclosure – The contractor-applicant shall disclose, at the time of application, any current or previous contractor license(s) held in Kansas or any other state and any disciplinary actions taken against such contractor-applicant. If the contractor-applicant is employed by, or a principle of a firm, the applicant shall disclose whether the firm, or the firm's employees or principals, have had any contractor-applicant disciplinary action taken against them in Kansas or any



APPLICATION TYPE: (check one)

New License

Renewal

Change Qualifying Party

Add Qualifying Party

LICENSE TYPE: (check one)

- ☐ **Class A General Contractor** (Requires 6 years' Class A building experience). Shall entitle the holder to construct, remodel, repair, demolish any structure and perform work described as Class D, Building Specialties.
- ☐ **Class B Building Contractor** (Requires 4 years' Class B building experience). Shall entitle the holder to construct, remodel, repair, demolish all structures not exceeding three stories in height, perform work described as Class D, Building Specialties, and perform non-structural remodeling, tenant-finish, and repairs of all structures.
- ☐ **Class C Residential Contractor** (Requires 2 years' Class C building experience). Shall entitle the holder to construct, remodel, repair, and demolish single-family or duplex residences, buildings accessory thereto, and perform work described as Class D, Building Specialties.
- ☐ **Class D Framing Contractor** (Requires 2 years' experience). Shall entitle the holder to construct, remodel, and repair framing work of a structure.
- ☐ **Class D Concrete Contractor** (Requires 2 years' experience). Shall entitle the holder to do general concrete work.
- ☐ **Class D Swimming Pool Contractor** (Requires 2 years' experience). Shall entitle the holder to construct or install swimming pools for all occupancies.
- ☐ **Class D Roofing Contractor** (Requires 2 years' experience). Shall entitle the holder to perform Roofing services for all occupancies. State of KS Roofing Registration Identification Number: _____
- ☐ **Class E Electrical Contractor** (Requires 4 years' experience). Shall entitle the holder to construct, remodel, and repair electrical work of a structure.
- ☐ **Class E Fireplace Contractor** (Requires 4 years' experience.) Shall entitle the holder to construct, remodel, and repair fireplace work of a structure.
- ☐ **Class E Mechanical Contractor** (Requires 4 years' experience.) Shall entitle the holder to construct, remodel, and repair mechanical work of a structure.
- ☐ **Class E Plumbing Contractor** (Requires 4 years' experience.) Shall entitle the holder to construct, remodel, and repair plumbing work of a structure.
- ☐ **Class L Limited Contractor** – Shall entitle the holder to perform work limited in scope as approved by the building official.

Business Name: _____

Business Conducted As: Individual Partnership Corporation LLC

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone Number: _____ Business Email: _____

Owner or Authorized Individual Signature: _____

(Person must be owner or full-time employee)

Owner or Authorized Individual Printed Name: _____

(Person must be owner or full-time employee)

QUALIFYING INDIVIDUAL

Qualifying Individual – MUST BE SIGNED BY QUALIFYING INDIVIDUAL

The contractor-applicant (Qualifying Individual) shall disclose any current or previous contractor license(s) held in Kansas or any other state and any disciplinary actions taken against such contractor-applicant or company. Attach documentation.

Qualifying Party is the individual who meets the experience and examination requirements for a license. Every license must have a qualifying party. The qualifying party must spend a minimum of 30 hours a week carrying out the work of the firm. The qualifying party shall be the legal representative for the contractor relative to City Code.

Qualifying Individual Print Full Name: _____

Qualifying Individual Signature: _____ Date: _____

Qualifying Individual Email: _____ Phone: _____

State of _____)
County of _____) SS.

BE IT REMEMBERED, that on this _____ date of _____, 20_____
Before me, the undersigned, a Notary Public in and for the County and State aforesaid came

_____, who is personally known to me to be the
same person who executed the within instrument of writing, and such person duly acknowledged the execution of
the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

Notary Public: _____ My Commission Expires: _____

QUALIFYING INDIVIDUAL WORK EXPERIENCE AFFIDAVIT

The Qualifying Individual must complete the Work Experience Affidavit in its entirety. The Qualifying Individual's work experience must be relevant in the classification for which they are applying. The experience must be at no less than a journeyman level, or as a foreman, supervising employee, contractor, or owner-builder.

From (Month/Yr): _____ To (Month/Yr): _____ Total Years: _____ Months: _____

Company Name: _____

Address and Phone: _____

Job Title: _____

List all specific duties performed or supervised in the Classification in which you are applying:

From (Month/Yr): _____ To (Month/Yr): _____ Total Years: _____ Months: _____

Company Name: _____

Address and Phone: _____

Job Title: _____

List all specific duties performed or supervised in the Classification in which you are applying:

From (Month/Yr): _____ To (Month/Yr): _____ Total Years: _____ Months: _____

Company Name: _____

Address and Phone: _____

Job Title: _____

List all specific duties performed or supervised in the Classification in which you are applying:



Signature: _____ Date: _____

My Commission Expires: _____

INSURANCE VERIFICATION REQUIREMENTS

The contractor shall be required to maintain and carry in force for the duration of the contract, insurance coverage of the types and minimum liability as set forth below.

All Class A, B, C, D, E, L, Roofing, and Swimming Pool contractors shall submit an original certificate of insurance. The certificate holder on the Certificate of Insurance shall be as follows:

City of Lawrence, Kansas

Planning and Development Services Department
1 Riverfront Plaza, Suite 320
Lawrence, KS 66044

A. General Liability General liability coverage in the amount of not less than \$1,000,000 per occurrence single limit for bodily injury and property damage.

B. Worker's Compensation and Employer's Liability

1. Worker's Compensation as required by State Statutes. If the contractor is exempt from the Worker's Compensation requirement, the contractor must submit a letter stating the exemption.
2. Employer's Liability \$100,000 each occurrence. (Include all states endorsements)

Before a license will be issued, the contractor shall furnish to the City of Lawrence, Planning and Development Services Department with a Certificate of Insurance verifying such coverage.

Name of Insurance Carrier (Liability): _____

Agent's Name: _____ Agent's Phone: _____

Name of Insurance Carrier (Workmen's Comp): _____

Agent's Name: _____ Agent's Phone: _____

WORKER'S COMPENSATION WAIVER

If the company has no employees, the following statement must be signed by the owner/operator of the Company and witnessed by a Notary.

I, _____, (PRINT NAME) as Owner or Authorized Individual of _____ (COMPANY NAME), do not have any employees, and therefore requesting to be exempted from carrying worker's compensation. I understand that at any time in the future I employ another individual I must provide Worker's Compensation Insurance Coverage as required by the State of Kansas and furnish City of Lawrence, Planning and Development Services Department with a Certificate of Insurance.

Signature: _____ Date: _____

State of _____)
County of _____) SS.

BE IT REMEMBERED, that on this _____ date of _____, 20_____
Before me, the undersigned, a Notary Public in and for the County and State aforesaid came _____, who is personally known to me to be the same person who executed the within instrument of writing, and such person duly acknowledged the execution of the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

Notary Public: _____

My Commission Expires: _____