

CITY OF GILLETTE

BUILDING INSPECTION DIVISION

201 E. Fifth Street, 2nd Floor Gillette, WY 82716 Telephone: (307) 686-5260 www.gillettewy.gov

INSTRUCTIONS FOR COMPLETING THE CITY OF GILLETTE CONTRACTOR LICENSE APPLICATION (RENEWAL)

The City of Gillette has adopted the 2021 IBC, IRC, IFC, IEBC, IMC, IPC and the IFG Codes. Please refer to City Code at www.gillettewy.gov > City Government > Current City Code > Chapter 5 "Buildings" for specifics.

Please read each section carefully. Failure to provide required documents will result in the application being returned to you. These documents are a part of the application and should be attached and submitted with the application. **The Application and Required Documents must be in the same business name.**

APPLICATION IS "RENEWAL" IF:

- > Applicant is presently licensed with the City and the license to be renewed is in good standing.
- Completed application must be received by Building Inspection within the 30-day grace period to be considered a Renewal.
- Completed applications received within the grace period, but after the corresponding submittal deadline, will not keep your license from lapsing.

APPLICATION IS "NEW" IF:

- > Applicant has not previously been licensed with the City.
- Applicant was licensed with the City of Gillette for the class of license applying for, however, such license has expired and the 30-day grace period has lapsed or will lapse prior to the completed application being received by Building Inspection.
- Applicant wishes to upgrade from Class C license(s) to a Class A, B or R license, from a Class R to a Class A or B license, or from a Class B to a Class A license.
- > Applicant wishes to apply for an additional license.
- > Applicant has a Class D and/or Class F license and wishes to add a Class A, B, R or C license or another type of Class D or Class F license.

Wyoming Corporate Registration - State of Wyoming Law - Registration is required for Wyoming and out-of- state contractors. Good Standing: (http://wyobiz.wy.gov/) the printout shall indicate a status of "active" and a standing of "good." If it does not, contact the Wyoming Secretary of State's office at (307) 777-7311. This is required annually.

<u>Workers' Compensation</u> - <u>Unemployment Insurance</u> - State of Wyoming Law - Wyoming is a monopolistic state. Workers' compensation and unemployment insurance are required by law and are administrated by the State. Compliance with these Wyoming State Laws is verified by the City during the license application process.

ALL CONTRACTORS MUST BE REGISTERED with Wyoming Worker's Compensation if they have employees. Please contact Wyoming Worker's Compensation Division at (307) 777-6763. For unemployment insurance requirements contact the Wyoming Unemployment Tax Division at (307) 235-3217, or (307) 235-3673. To request letters of good standing, please use this link: cogs.state.wy.us

Certificate of Insurance – [] Certificate of Insurance on file is active.

<u>Surety/License & Permit Bond</u> – [] Original Bond/Continuation Certificate on file is active.

<u>Electrical License</u> – State of Wyoming – **If Applicable** – attach copy to application.

Application Renewal Fees

Class A - General Contractor	\$500	Class D - Vocational Contractor	\$ 50
Class B - Building Contractor	\$300	Class F - Fire Suppression Contractor	\$ 75
Class R - Residential Contractor	\$150	Class C - Specialty Contractor	\$ 75

Submittal Deadline - Applications are submitted to the Building Inspection Division for processing. **Incomplete applications will be returned to the applicant.** Completed applications received by 5:00 PM on the Monday (Tuesday if Monday is a holiday) before the Board's monthly meeting, will go before the Board for approval at that month's meeting. **Applications received after the deadline listed below will be processed for approval at the next BOE meeting.**

DEADLINE	FOR BOE MEETING ON	DEADLINE	FOR BOE MEETING ON
January 2, 2024	January 9, 2024	July 1, 2024	July 9, 2024
February 5, 2024	February 13, 2024	August 5, 2024	August 13, 2024
March 4, 2024	March 12, 2024	September 3, 2024	September 10, 2024
April 1, 2024	April 9, 2024	September 30, 2024	October 8, 2024
May 6, 2024	May 14, 2024	November 4, 2024	November 12, 2024
June 3, 2024	June 11, 2024	December 2, 2024	December 10, 2024

ADMINISTRATIVE USE ONLY Board of Examiners Action [] Approved [] Denied at/ meeting
License #



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CONTRACTOR LICENSE APPLICATION – (RENEWAL)

	le. See instructions for details and additional information.
DATE OF APPLICATION:/	
APPLICANT CONT	TACT INFORMATION
Please remember to contact Building Inspection i	in writing with any address changes during the year.
Business Name:	
	City State Zip Code
	Fax Number:
	Other Number:
Contact Person's email:	
Unless the Owner/Master of Record is the same for each Class D Vocational Contractors	parate application is required for each license applied for. h license being applied for. Class C Specialty Contractors (Sub-Contractors)
 [] Electrical [] Gas Pipefitter [] HVAC Mechanical [] Plumbing Class F Fire Suppression Contractors [] Chemical Fire Suppression [] Fire Alarm [] Sprinkler (Fire/Standpipe) Building Contractors** (General Contractors) [] Class A-General Contractor [] Class B-Building Contractor [] Class R-Residential Contractor 	 [] Concrete - Structural (Type 1) and Non-Structural (Type 2) [] Drywall & Plaster [] Elevator [] Excavation, Grading, Snow Removal & Demolition [] Framing – Stick Built Structure [] Insulation [] Landscaping, Sprinkler Systems, Tree Trimming & Fencing [] Limited Technician [] Low Voltage Technician [] Manufactured Housing (Type 1) [] Masonry – Structural (Type 1) and Veneer (Type 2)
**May not perform Class D, Class F, Class C Water & Sewer or Class C Electrical category work without holding the appropriate license. *May perform all Class C categories except Class C Water & Sewer or Class C Electrical.	[] Roofing – General/Standard [] Roofing - Shingle [] Signage [] Trim Carpentry, Painting & Flooring [] Water & Sewer Pipe Layer [] Windows, Siding, Gutters & Garage Doors [] Miscellaneous (specify):

WYOMING CORPORATE REGISTRATION - Not applicable for sole proprietorships and general partnerships.

TYPE OF BUSINESS ENTITY	LIST THE NAME AND TITLE OF EVERY OWNER
[] Corporation	(Officer, member, partner, sole proprietor, etc.)
[] Limited Liability Company [] Limited Partnership	
[] General Partnership	
Sole Proprietorship Other	
EMPLOYEES Franciscos that are as will be working in	a tha City limita
EMPLOYEES - Employees that are or will be working in	n the City limits:
[] No, applicant does not have employees. (Continue	e on to Status Questions)
[] Yes, applicant has employees from [] Wyoming	[] Out-of-State
WORKERS' COMPENSATION - Letter of Good Stand	ding
Requested from State of Wyoming - Date of Request _	
UNEMPLOYMENT INSURANCE - Letter of Good Star	nding
Requested from State of Wyoming - Date of request	

STATUS QUESTIONS

Please answer each of the following questions. When responding to Questions #1 through #4, if answer is "Yes" to any of these questions, attach copies of relevant paperwork, including court documents, bankruptcy paperwork, if applicable.

		YES	NO
1.	Has Applicant/Owner had a contractor license or vocational license denied, fined, suspended, or revoked in the past year?		
2.	Are there any liens, lawsuits, or judgments of record pending against Applicant/Owner in the past year (relating to business activities within the scope of this license application)?		
3.	Is Applicant/Owner currently in bankruptcy proceedings or operating under a Court supervised reorganization plan as a debtor in possession within the past year?		
4.	Has any Applicant/Owner been convicted of a felony (related to forgery, embezzlement, obtaining money under false pretenses, larceny, or extortion) within the past year?		

Continue on next page

AFFIDAVIT OF APPLICANT

The following Affidavit of Applicant shall be com-	pleted by	y the ow	ner (officer, member, partner, or sole proprietor).
I, (print name),			, (print title)
the undersigned, being duly sworn, certify the s	tatemen applica	ts made tion, or a	in this application are true. I acknowledge that any false, at a hearing on the same, will result in the denial of license
			Date:
Signature of Applicant			
STATE OF)			
COUNTY OF	SS.		
On this day of		, 20	, the above and foregoing was subscribed and sworn to
before me by			_, whom I know personally, or whose identity was proven
to me, on the basis of satisfactory evidence.			
Witness my hand and official seal.			
My commission expires:			Notary Public
	MAST	ER OF I	RECORD
I, (print name)			am the Master of Record for (If No Master/Test required for
(business name)the information should be class of license, the information should be classed as a second should be cla	d be co	mplete	d with the name of the main contact person for the
business.)		•	•
Please read the following statements, initial to the content:	each, in	dicatin	g you have read, understand, acknowledge and certify
I acknowledge that I may be the Master I acknowledge that I may be the Master In the event of my resignation from the	sis to ins of Reco of Reco e capac	spect are red for or o	nd supervise the work undertaken by the applicant. nly one entity.
			Date:
Signature of Master of F	Record		
STATE OF)			
COUNTY OF	SS.		
			, the above and foregoing was subscribed and sworn to
to me, on the basis of satisfactory evidence.			_, whom I know personally, or whose identity was proven
Witness my hand and official seal.			
My commission expires:		N	lotary Public