



CONTRACTOR LICENSE APPLICATION

CITY OF HOT SPRINGS

Name of Business _____ Date of Application _____
 Business Address _____ Bus. Phone # _____
 Name of Owner _____ Home Phone # _____
 Owner's Address _____ Cell Phone # _____
 City/State/Zip _____ E-Mail _____

Description of Work Performed: _____

Number of Years Experience: _____ Years in business under this name: _____

Type of License:

Class A-2 Class A Class B Class C Class TC*

***Requires Surety Bond of \$1000**

List Four Verifiable References of projects completed in the license class applied for:

Name _____	Name _____
Project _____	Project _____
Addr _____	Addr _____
City/State _____	City/State _____
Phone _____	Phone _____

Name _____	Name _____
Project _____	Project _____
Addr _____	Addr _____
City/State _____	City/State _____
Phone _____	Phone _____

Copy of the following documents are required and must be attached to application:

South Dakota Excise Tax License/Certificate of Liability Insurance & Worker's Comp/Identification Verification/Surety Bond where required

The undersigned agrees to the terms and conditions set forth by the City of Hot Springs for obeying the laws, ordinances, and codes set forth by the City Council and enforced by the Building Official/Inspector. It is understood that violations could result in immediate suspension of any Contractor's License and/or Building Permit.

LICENSE FEES: Class A2 (\$200) Class A (\$100) Class B (\$50) Class C (\$35) Class TC (\$50)

_____ Applicant's Signature	_____ Date	_____ Building Official's Signature	_____ Date
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