Application for Contractor's License

Requirements to Obtain a Contractor's License

WILL NOT BE ACCEPTED UNLESS COMPLETED WITH ALL DOCUMENTS

City of Gulfport Urban Development Building Code Services 1410 24th Avenue Gulfport, MS 39501

- Completion in its entirety of the application **including notarization**. *Must be in the name of the qualifying party(individual tested) for the company*.

- Submission of current license with Mississippi State Board of Contractor's with registration numbers (if any).

- *Provide five letters of reference* addressed to the Building Official of the City of Gulfport. The letters may be from businesses you have performed work for or from homeowners. The letters must include the name, title or position, addresses and phone numbers of the persons who have personal knowledge of the applicant's character, experience, skills and abilities. Letters not written on business letterhead must be notarized. **THE LETTERS ARE NOT REQUIRED IF THE APPLICANT HOLDS A LICENSE FROM THE STATE OF MISSISSIPPI'S BOARD OF CONTRACTORS.**

- Submission of a Certificate of Insurance with *Public Liability Insurance* with $100,000 single occurrence and $300,000 aggregate with completed operations coverage. **The Certificate of Insurance shall identify the City of Gulfport as the certificate holder using the following information:**

City of Gulfport
Department of Urban Development
Building Code Services
1410 24th Avenue
Gulfport, MS 39501

- Submission of a copy of a *current business privilege license* from the jurisdiction (municipal or county) where your corporate business and /or company headquarters is located.

- Submission of a valid photo identification *of the qualifying party*.

- Payment of $100.00 contractor's licensing fee. **(Exempt if you hold a Certificate of Responsibility (COR) from the State of Mississippi's Board of Contractors.)**

- **OPTIONAL:** Submission of a notarized letter from the qualifying party authorizing others to act on his/her behalf. This letter must specifically including items such as obtaining or renewing licenses, obtaining permits, call in inspections ….etc.

If you have any questions, you may contact Building Code Services at

PHONE: 228-868-5715 or 228-868-5714
FAX: 228-868-5716

COMPLETE AND SIGN THE APPLICATION ON THE REVERSE SIDE OF THIS PAGE.

APPLICATION FOR CONTRACTOR'S LICENSE

Instructions to Applicant

FILL THIS APPLICATION IN YOUR OWN HANDWRITING IN INK. Before you submit your application, see that all information called for has been completed. If your application is incomplete, it may be returned to you for completion, which will cause delay. This application constitutes a part in your being considered for a license. **FOLLOW INSTRUCTIONS CAREFULLY**. Applications and tests cannot be returned to applicants.

All statements are subject to investigation and verification. **BE SURE TO ADVISE BUILDING CODE SERVICES OF ANY CHANGES IN YOUR ADDRESS.**

NAME OF APPLICANT

_____
Printed Name of Applicant (First, Middle, Last)

_____
Company

_____
Street Address

_____
P.O. Box

_____
City State Zip code

_____
Home Phone Work/Cell Phone

_____
Fax

_____
Email

TYPE OF LICENSE APPLYING FOR (Initial Box)

_____ Master Electrical
_____ Master Plumbing
_____ Mechanical/HVAC
_____ Hood & Duct
_____ Fixed Suppression
_____ Fire Sprinkler
_____ Fire Alarm
_____ Lawn Irrigation
_____ General *Contractor "A"*
Commercial (>$100,000 &/or 7,500 sf.)
_____General *Contractor "B"*
Light Commercial & Residential
_____General *Contractor "C"*
Residential Remodeler
_____Roofing
_____Swimming Pool
_____Other

CERTIFICATIONS/LICENSES

Please name and attach copy of all certifications and licenses with registration numbers which you currently hold.

CERTIFICATION/LICENSE	**REGISTRATION NUMBER**

State below any other facts which you consider to be successful work qualifying you for the license for which you are applying.

_____

_____

_____

_____

I HEREBY CERTIFY that this application contains no willful misrepresentation or falsification; that the information given by me is true and completed to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification my application may be rejected and my name removed from the list, and disqualified from applying in the future for a license in the line applied for.

_____
Printed Name

_____
Signature

_____
Date

_____
Notary