

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Mechanical Contractor License Application

Contractors must be licensed before soliciting, contracting or performing work that requires a permit.

Mechanical Contractor A (Commercial)

Installation, replacement, service and repair gas piping, heating, ventilating and air conditioning systems in any type or size structure.

Mechanical Contractor B (Residential)

Installation, replacement, service and repair gas piping, heating, ventilating and air conditioning systems in one and two family dwellings and accessory structures of three stories or less in height.

Mechanical Contractor C (Specialty)

- C-1 Gas Piping.** Installation, replacement, service and repair of gas piping systems, and installation, replacement, service and repair of gas appliance not connected to duct systems.
- C-2 Commercial Refrigeration.** Installation, replacement, service and repair of commercial refrigeration systems.
- C-3 Residential Maintenance, Repair, and Replacement.** Replacement, service and repair of heating, ventilating and air conditioning systems in existing one and two single family dwellings of three stories or less in height.
- C-4 Residential Remodeling.** Installation, replacement, service and repair of ductwork serving the heating, ventilating and air conditioning systems in existing one and two family dwellings and accessory structures of three stories or less in height.

Mechanical Contractor E (Elevators/Escalators)

Construction, alteration and repair any device or equipment under the Pikes Peak Regional Building Code.

The items listed below are required for consideration of your license application:

Application form- MUST BE FILLED OUT COMPLETELY OR WILL NOT BE ACCEPTED

**Attaching the Examinee's resume is recommended to show additional experience*

Copy of Driver's license or Photo ID card issued by a state or federal government

\$50 Application/Processing Fee (includes one test administered by RBD)

The non-refundable fee is payable by cash, Visa, Mastercard or check.

Exam (Master Mechanical Examination from ICC is also accepted)

Reference Letters for applicant (3)

Affidavit (Sole Proprietors Only)

Criminal Background Check performed by RBD

Mechanical Contractor License Application

Exam

Submit the application at least two days prior to the test date you have chosen. Write the exam date on the application. Tests are administered Monday through Friday at 8 am and 12 pm by appointment (except holidays) at Regional Building Department ("RBD"). Arrive at least 15 minutes prior to examination. Bring a pocket calculator (optional), and the code books applicable to the exam. **RBD does NOT provide the code books.** Do not bring other materials. The Pikes Peak Regional Building Code can be printed from our web site www.pprbd.org or purchased as well as other code books at RBD.

Duration of Exams & Codes Tested by License Type:

A (Commerical)	4 hours	IMC, IFGC, IECC, RBC	E (Elevators/Escalators)	(No exam)
B (Residential)	3 hours	IMC, IFGC, IECC, RBC	C-3 (Specialty)	2 hours IMC, IFGC, RBC
C-1 (Gas Piping)	2 hours	IFGC, RBC	C-4 (Specialty)	1.5 hours IMC, IECC, RBC
C-2 (Specialty)	2 hours	IMC, IECC, RBC		

IMC (International Mechanical Code)
IFGC (International Fuel Gas Code)

RBC (Pikes Peak Regional Building Code)
IECC (International Energy Conservation Code)

Note: You may test on either the 2003 or the 2009 Codes until January 1, 2012, after which time testing will only be available on the 2009 Codes.

Retesting

If your score is below 75 percent, call the Contractor Licensing office at (719) 327-2887 within 30 days to keep your application on file for retesting. To retest, pay an additional \$35 fee and select a testing date that is at least 30 days after the first exam. If you fail a second time, a 6-month waiting period is required before retesting.

References

Three (3) references are required, (see attached forms). The reference cannot be provided by a relative. References should document the experience listed by license type. Examples of preferred references include an architect or engineer who worked on the site of the applicant's project; a building owner for whom the applicant worked; and a general contractor for whom the applicant served as a job site supervisor. **The examinee is responsible for providing the attached reference forms to three individuals. The individuals providing the references are responsible for sending the forms to Regional Building Department.** The applicant may call the Contractor Licensing Office at (719)327-2887 to verify that references have been received.

License Review

The Mechanical Committee reviews license requests and makes recommendations for approval, conditions or denials to the Board of Review. All required references, application, and exam must be complete before the license request is placed on the meeting agenda. The deadline is two weeks before the committee meeting on the second Wednesday of each month. License recommendations by the Mechanical Committee must be approved by the Board of Review which meets the third Wednesday of each month.

License Issuance

Within 180 days of the Board of Review's approval, the examinee must come to RBD to obtain the license. After 180 days, an unclaimed license is voided and the entire application file is discarded. Work cannot be solicited, contracted or performed until the license is issued to you.

The following is required to obtain a permit:

Liability Insurance Certificate
Workers' Compensation Certificate or "Letter to Exempt" if examinee has no employees, and
License fee payment

License Fees

License fees are paid before license issuance and future renewals. Fees are not prorated for any portion of the year. Mechanical A, B, C, D, and E License fees are \$100 annually.

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Mechanical A, B, C or E License Application

Receipt #

It is requested that the Board of Review consider this application for the stated license in compliance with the Pikes Peak Regional Building Code.

MECHANICAL CONTRACTOR LICENSE REQUESTED (check one)

EXAM DATE _____

A (Commercial) B (Residential) C-____ (Specialty) E (Elevators/Escalators)

8am 12pm
2003 2009

COMPANY INFORMATION

Type of company (circle one) Individual Partnership Corporation LLC

NAME OF COMPANY _____

Mailing address _____ City _____ State _____ Zip _____

E-mail address _____ Phone () _____ Fax () _____

COMPANY'S PRINCIPAL OFFICERS, PARTNERS OR OWNERS

Name _____ Title _____

Name _____ Title _____

EXAMINEE'S AFFILIATION WITH THE COMPANY (owner, partner, employee, etc.) _____

Number of years company has operated as a contractor (if new, write "new") _____

Contractor type of work (circle one or both, if applicable) Residential Commercial

Company's specialty area of construction _____

Has the company ever defaulted on a contract? _____ Explain _____

Has a mechanic's lien judgment been filed against property on which the company was the contractor? _____ Explain _____

Has the company been a defendant in a collection action court case? _____ Explain _____

Has the Examinee or the company ever declared bankruptcy? _____ Explain _____

Has the company ever had a contractor license suspended or revoked? _____ Explain _____

LICENSES HELD BY THIS COMPANY (Must attach copies of licenses)

Jurisdiction — License type and number

Jurisdiction — License type and number

_____	_____
_____	_____
_____	_____
_____	_____

CERTIFICATION *(The following declaration is to be signed by the principal officer of the company)*

The undersigned, on behalf of the partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs, county of El Paso, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Organization Name *(print)* _____

Representative's Name and Title *(print)* _____

Signature of Representative _____

EXAMINEE APPLICANT INFORMATION

LEGAL NAME *(Last)* _____ *(First)* _____ *(Middle initial)* _____

Home address _____ City _____ State _____ Zip _____

E-Mail address _____ Phone () _____

SSN _____ Date of Birth _____

What is your area of expertise in the building industry? _____

Have you ever worked for a partnership, corporation or company that defaulted on a contract? _____

Explain _____

Have you ever been convicted of a felony? _____ *Explain* _____

Have you ever had a contractor license suspended or revoked? _____ *Explain* _____

How long have you worked in building industry? _____

WORK HISTORY

Dates	Company	Address	Position

LICENSES HELD BY THIS EXAMINEE

License type — Jurisdiction	License type — Jurisdiction

EDUCATION

Dates	Trade School or Institution & Location	Degree or Certificate

Project History (Projects performed or supervised by you personally)

1. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

2. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

3. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

4. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

5. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

6. Address _____ Type of Construction _____

Occ. Type _____ Size _____ Project Cost _____ Your Position _____

CERTIFICATION (The following declaration is to be signed by the examinee)

Pikes Peak Regional Building Department requires all persons seeking a license to undergo a **CRIMINAL BACKGROUND CHECK**. By filing this application with Pikes Peak Regional Building Department you understand and agree that Pikes Peak Regional Building Department will undertake a **CRIMINAL BACKGROUND CHECK**. Some of the information I am providing in this application will be used to check my **CRIMINAL BACKGROUND**. I understand that Pikes Peak Regional Building Department may deny me a license after reviewing my **CRIMINAL BACKGROUND**. I hereby authorize Pikes Peak Regional Building Department to perform a **CRIMINAL BACKGROUND** check.

I further agree and understand that if any information provided by me on this application is untrue, that any license granted to me by Pikes Peak Regional Building Department is automatically revoked. I may appeal the revocation to the Board of Review ("Board") by filing a notice of appeal with the Board within thirty (30) days of the date of the notice sent to me by Pikes Peak Regional Building Department. If the appeal is not received by Pikes Peak Regional Building Department within the thirty (30) days, my right to appeal is forever waived.

Signature of Examinee _____ Date _____

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Reference Request

To:

Reference Name

Address

From:

Applicant (Examinee) Name

Company

License Type

The application for license (as stated above) is under consideration by the Board of Review on behalf of the city of Colorado Springs, county of El Paso, and participating municipalities in the jurisdiction served by Pikes Peak Regional Building Department.

As a reference listed by the applicant, your response is important in assessing this individual's qualifications for the requested contractor license. For your convenience, questions are listed on the back of this form. Information should be based on your knowledge of the examinee's work on a project, and include project type and scope, and the work position held by the applicant. References may NOT be provided for a relative or by a PPRBD employee.

Please complete and sign this form and return to Pikes Peak Regional Building Department at your earliest convenience. Please remember to return both pages of this reference form by mail, hand delivery, fax to **(719)327-2951** , or e-mail to **licensing@pprbd.org**

If you have any questions, please contact the Contractor Licensing Office at (719) 327-2887.

Your assistance and opinions are valued, and will remain strictly confidential.

Reference of applicant's experience & qualifications

Additional information may be attached to this form.

PROJECT

Name _____

Address _____ City _____ State _____ Zip _____

Cost _____ Size _____ Type: Commercial Residential

If commercial, what was the "use" (check all that apply)

Office Retail Church School Eating establishment

Other _____

Your relationship to the applicant on this project was _____

The applicant's position on this project was _____

If subcontractor, what trade or work was performed? _____

Your opinion of the applicant's performance on this project is _____

APPLICANT'S CHARACTER

Please circle the appropriate number that reflects your assessment of the applicant.

	Poor		Average		Excellent	
Financial responsibility	1	2	3	4	5	Unknown
Ethics	1	2	3	4	5	Unknown
Administrative capabilities	1	2	3	4	5	Unknown

RECOMMENDATION

Do you recommend granting the requested license to this applicant and company? Yes No

Comments: _____

CONTACT INFORMATION (please print)

Name _____

Address _____ City _____ State _____ Zip _____

Phone (day time) () _____

Signature _____ Date _____

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