

PIKES PEAK REGIONAL BUILDING DEPARTMENT

FIRE LICENSE RESPONSIBLE MANAGING EMPLOYEE CHANGES

FIRE LICENSE TYPE (circle one)

CHANGE TYPE (circle one)

FAC-A

FSC-A

FSC-C

FSC-H

Replacement RME

FAC-B

FSC-B

FSC-D

FSC-M

Additional RME

NAME OF COMPANY _____ Phone () _____

Mailing address _____ City _____ State _____ Zip _____

COMPANY'S PRINCIPAL OFFICERS, PARTNERS OR OWNERS

Name _____ Title _____

Name _____ Title _____

LICENSE HOLDER INFORMATION

Full Name _____ SSN _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

RESPONSIBLE MANAGING EMPLOYEE (RME) INFORMATION

Name _____ SSN _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

NICET Certificate # _____ NICET Level _____

Professional Engineer Licensed by state of Colorado # _____ Date _____

CERTIFICATION

The undersigned individual, partnership or corporation, does hereby declare and warrant that the above named owner, principal or manager for a contractor's license has the express authority to bind this company, partnership or corporation by his application herein; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs and the county of El Paso, and adopted by other municipal entities within El Paso County in regards to any work which may be done by this firm pursuant to the applied contractor's license.

Signature _____ Date _____

Print Name and title (owner, principal or manager) _____

I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. 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 on behalf of the Colorado Springs Fire Department is automatically revoked.

Signature _____ Date _____

Print Name and title (RME) _____

Signature _____ Date _____

Print Name and title (Licensee) _____