



**CITY OF HAYSVILLE
Public Works Department**

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**CEMENT CONTRACTOR LICENSE APPLICATION
CERTIFICATE OF INSURANCE REQUIRED**

License..... \$50.00

Business Organization: _____ Individual _____ Partnership _____ Corporation _____

Name of qualified person who passed examination _____

Name of Company _____

Business Address _____

City _____ State _____ Zip _____

Business Phone _____ Mobile # _____ Fax# _____

Email _____

Authorized to secure permit:

Signature of qualified person:

Date _____

For office use only:

Receipt No. _____

Certificate of Insurance _____

License No. _____