

CITY OF HAYSVILLE

Public Works Department 401 S. Jane PO Box 404 Haysville, KS 67060 Phone: 316/529-5940 | Fax: 316/529-5945 dsmith@haysville-ks.com nstark@haysville-ks.com

Building Contractor License Application

CERITIFICATE OF INSURANCE REQUIRED

Class A\$125.00	(\$30,000 and above)
Class B\$100.00	(Below \$30,000)
Class C\$75.00	(Roofing/Siding Contr.)
Class D \$50.00	(Fence Contr.)

(Please list Individuals Authorized to Secure Building Permits below)

(Pursuant to Section 4-102 of the Haysville City Code,

A copy of the current business license with the City of Wichita and/or MABCD must be included)

Business Organization:Indiv	idualPartnership _	Corporation _		
Name of qualified person who passe	ed examination			-
Name of Company				-
Business Address				-
City	State	Zip		-
Business Phone	Mobile #	Fax	Email	-
Signature of qualified person: Date	_	índividuals Authoriz ()	
For office use only:	*Ple	ase include a copy o	of current license with MABCD	
Receipt No	_ Date			
Certificate of Insurance	_ Fee			
License No	MABCD License #			