116 W Main
PO Box 273
Solomon KS 67480
Phone: 785-655-3311
Fax: 785-655-3170

AndreaM@Solomon-KS.com
KristaR@Solomon-KS.com

Contractor License Application

Business Name _____

Address _____ City _____ State _____ Zip _____

Contact _____ Best Phone _____

Email: _____

Type of Contractor _____
(general, electrical, plumbing, roofing, siding, masonry, cement, excavating, etc)
General and Demolition Contractors must have a license if the total cost of the project is greater than $3,000.

Number of Years in Business _____ License Cost: $25.00
Valid: *January 1st – December 31st*

Two References (current within last 2 years):

Name _____ Name _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Phone _____ Phone _____

Signature of Applicant _____ Date _____

Provide proof of insurance:
Liability: $100,000 for death or injury of any person
$300,000 for death or injury of any number of persons in any one accident
$500,000 for property damage in any one accident
Policies must be issued by a company authorized to do business in the State of Kansas
***Roofing Contractors must also present a copy of their State License**