

Renewal Checklist

Do NOT mail the renewal checklist back to us, this is for your company use only. **Do NOT** mail completed renewal application back to Contractor Licensing **BEFORE December 1, 2008**. Your license will expire on December 31, 2008 the fee for renewal is \$200.00 per license. **If your company renews the license after January 31, 2009 there will be a \$75.00 late fee assessed. There is no negotiating the late fee, this is mandatory directed by the Board of County Commissioners. If your completed renewal application is received and postmarked after January 31, 2009 you will have to pay the late fee.**

_____ **PAPER RENEWAL APPLICATION** completed in its **ENTIRETY**. (If your company mails a renewal application there is no need to also renew online.): **If company holds more than one license a renewal application is required for each license. DO NOT** mail renewal application and ask for it to be held until education is completed. **All incomplete applications will be returned. We will NOT accept any faxed renewal applications.**

_____ **ONLINE RENEWAL (Renewing your license online)** **If your company renews online there is no need to mail a paper copy.**
To renew online please go to <http://contractorlicensing.jocogov.org>
Renewing your license online, continuing education is required to have been completed before you are able to renew the license.

_____ **CONTINUING EDUCATION:** If a contractor attended continuing education, at Contractor Licensing Seminars located at the Overland Park Convention Center or Johnson County Administration Building, **you do not have to submit copies of certificates** with renewal application. **If a contractor attended courses outside of what Johnson County offers, a copy of the completion certificate is required.** (This applies to both paper and online renewal applications.)

_____ **PROOF OF INSURANCE:** ALL Companies are required to submit a certificate of insurance with the submission of a renewal application. If your company uses the online renewal application, you are still required to submit a certificate of insurance. A faxed or mailed copy from your insurance company will be sufficient.

_____ **SECRETARY OF STATE CERTIFICATE OF GOOD STANDING:** All corporate entities (Inc., LLC, Co., Corp., etc.) are required to submit proof of good standing from the state in which they are registered. Sole proprietor companies will not be required to submit this evidence.

_____ **PAYMENT:** Method of payment acceptable will be Cash, Check, Money Order, and Credit Card. If paying by check please make checks payable to: **Contractor Licensing. Only use credit card form if company is mailing in a renewal application and wants to pay by credit card.**

_____ **SIGNATURES and PERMITTEES:** Signature(s) are required for each qualifying individual(s) for each appropriate license. List any personnel your company authorizes to pick up building permits on your behalf. **If the individual is not listed on the renewal application, they will not be listed or will be removed in the database, and therefore will not be able to pull permits.** Each company is limited to ten Permittees. For each additional Permittees card requested over ten (10) there will be a fee of \$5.00 per card.

_____ **JURISDICTIONS:** Circle **ALL** jurisdiction(s) company performs work.



Credit Card Form

Payment for: (Contractor License(s) for Johnson County, KS)

All credit card payments must be accompanied by the Credit Card form. (Circle License Type) Use of this form is only if you wish to pay via credit card for your initial application. All credit card forms are destroyed upon completion of application therefore the records are not retained for renewal purposes.

FEES: \$100.00 One-Time Registration Fee (New Applications Only)

\$200.00 Each License Fee

\$ 75.00 Late Fee (Renewals Only)

Please circle the appropriate license(s):

- | | | |
|---|---|--|
| <input type="checkbox"/> Class A – General Contractor | <input type="checkbox"/> Class DM – Mechanical Contractor | <input type="checkbox"/> Class DF – Fire Protection Contractor |
| <input type="checkbox"/> Class B – Building Contractor | <input type="checkbox"/> Class DE – Electrical Contractor | <input type="checkbox"/> Class DR – Roofing Contractor |
| <input type="checkbox"/> Class C – Residential Contractor | <input type="checkbox"/> Class DP – Plumbing Contractor | <input type="checkbox"/> Class DS – Swimming Pool Contractor |

Please let this serve as an authorization to charge my credit card in the amount of \$ _____ for the above license(s) and one-time registration fee. A convenience fee of 3.49% - 3.99% of the total will be accessed to your credit card.

Please Print or Type Legibly Your Name as it appears on the credit card:

Type of Credit Card: Visa ___ MasterCard ___ American Express ___ Discover ___

Credit Card # _____

Expiration Date: _____ Code # _____ (This is a 3 or 4 digit number on the back of your card after the last digits of your account. It may be located on the front for American Express cardholders.)

Signature: _____

(By signing this form, I understand and agree to these terms and expressly waive any rights to credit card charge backs as a means to mediate disputes.)

Date: _____ E-mail Address: _____@_____

Address: _____ (This address must be the billing address for the credit card holder.)

City: _____ ST: _____ Zip: _____

Phone Number: (____) _____ - _____ (Company's Phone Number)

Alternate Phone Number: (____) _____ - _____ (Alternate Company's Phone Number)

Fax Number: (____) _____ - _____ (Company's Fax Number)



DO NOT MAIL RENEWAL INFORMATION UNTIL DECEMBER 1

Renewal Form

LICENSE FEE - \$200 License Fee (Each License Not Each Qualified Individual)

Please Note: Fees are Non-Refundable. NO Contractor License may be Transferred or Reassigned.

Methods of payments: Cash, Money Order, Checks (Make Checks Payable to Contractor Licensing), Credit Card (We Accept Visa, MasterCard, Discover and American Express)

License Type Please complete separate application for each license.

- | | | |
|---|---|--|
| <input type="checkbox"/> Class A – General Contractor | <input type="checkbox"/> Class DM – Mechanical Contractor | <input type="checkbox"/> Class DF – Fire Protection Contractor |
| <input type="checkbox"/> Class B – Building Contractor | <input type="checkbox"/> Class DE – Electrical Contractor | <input type="checkbox"/> Class DR – Roofing Contractor |
| <input type="checkbox"/> Class C – Residential Contractor | <input type="checkbox"/> Class DP – Plumbing Contractor | <input type="checkbox"/> Class DS – Swimming Pool Contractor |

Jurisdictions Company Performs Work (Please circle all that apply)

- | | | | |
|----------------|-----------------|------------------|------------------|
| Johnson County | Topeka, KS | Kansas City, KS | Baldwin City, KS |
| Lawrence, KS | Kansas City, MO | Miami County, KS | Other |

Disclaimer: The Contractor applicant certifies that the applicant (or the applicant's designated representative) is currently qualified for licensure and is a full-time employee of the Contractor applicant. Any false statements made in this application by the Contractor applicant licensee will result in license suspension or revocation.

COMPANY INFORMATION: Please Print or Type Legibly (All highlighted items must be completed if applicable.)

Company Number _____

Company Name _____

Mailing Address _____ **City** _____ **State** _____ **Zip** _____

Telephone Number _____ **Fax No.** _____

Owner or Authorized Individual Signature _____ **Date** _____

Company Contact Individual other than Qualified Individual – Print Name & Telephone Number _____

Company Contact Individual other than Qualified Individual – E-mail Address _____

For Office Use Only: Co. Number _____ Check Number _____ Mail _____ In-Person _____

