



ROAD & BRIDGE DEPARTMENT

970.668.3590 ph | 970.668.3592 f | 0037 Peak One Dr. | PO Box 626  
www.SummitCountyCO.gov Frisco, CO 80443

## Annual Contractor Information

1. All information needs to be filled out completely to prevent delaying the permit application.
2. A certificate of General Liability Insurance must be provided to the Road and Bridge Department before the first permit of the season is issued other than an Emergency exception from section 5403.04 of chapter 5 of the Land Use and Development Code. This certificate of insurance must show Summit County Road and Bridge listed as the certificate holder. Certificates must also show policy number, effective dates, expiration dates and minimum limits of \$990,000 of General Liability Insurance.
3. List people who are allowed to pull permits. These names are company employees only -homeowners are not allowed.
4. List each person, along with their phone number, who will be over seeing or running the project. These individuals must have read and understand Chapter 5 of the Land Use and Development Code and have the responsibility to activate the permit.
5. Subcontractors will need to fill out separate contractor information form along with providing General Liability Insurance.

COMPANY INFORMATION DATE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

POINT OF CONTACT \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

FAX# \_\_\_\_\_ MOBILE# \_\_\_\_\_

OWNER/PRESIDENT OF COMPANY:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

APPROVED PERSONNEL FOR SIGNING PERMIT

The following people employed by the above named company have permission to sign for all applicable permits. Only the people listed will be allowed to pull permits.

PRINT NAME

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

PROJECT FOREMANS AND PHONE NUMBERS

- These people have read and understand Chapter 5 of Land Use and Development Code.

PRINT NAME

PHONE #

- |          |        |       |
|----------|--------|-------|
| 1. _____ | (____) | _____ |
| 2. _____ | (____) | _____ |
| 3. _____ | (____) | _____ |
| 4. _____ | (____) | _____ |
| 5. _____ | (____) | _____ |
| 6. _____ | (____) | _____ |
| 7. _____ | (____) | _____ |
| 8. _____ | (____) | _____ |

INSURANCE INFORMATION

COMPANY NAME: \_\_\_\_\_

COMPANY PHONE: \_\_\_\_\_

POLICY #: \_\_\_\_\_