



City of Park City  
 1941 E. 61<sup>st</sup> St N  
 Park City, KS 67219-2499  
 316.744.2026 • fax 316.744.3865

**Request for Trade Contractor License**

<b>License Year</b>	<b>2024</b>
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<b>Business</b>	<b>Phone</b>	<b>Date of application</b>
_____	_____	_____
Name	Phone	
_____	_____	
Address	Cell Phone	
_____	_____	
City State Zip	Email	

**TRADE LICENSE TYPES – Check type**

<input type="checkbox"/> Electrical	<input type="checkbox"/> Gas Fitting
<input type="checkbox"/> Mechanical (HVAC and or Refrigeration)	<input type="checkbox"/> Drain Laying Contractor
<input type="checkbox"/> Plumbing	<input type="checkbox"/> LP Gas
	<input type="checkbox"/> Lawn Sprinkler

**License Fees:** A fee of **\$100.00** per year or any portion thereof shall be paid to the City of Park City prior to issuance of a license. Extra fees are required if more than one class of license is issued. Unless renewed, all licenses expire on the 31st day of December of each year. A fee of **\$25.00** is charged on all new applications for trade licenses. The City will accept checks or cash. Credit Card payments can be made in person or by FAX; with a follow-up phone call. There is a \$2.50 convenience fee charged by the credit card company. **DO NOT PUT CREDIT CARD INFORMATION ON YOUR APPLICATION;** a clerk will call you for processing.

**COPIES OF THE FOLLOWING ARE REQUIRED:**

<b>Certificate of Insurance</b>		<b>City, County, ICC or Block License No.</b>	
<b>Insurance Expiration Date</b>		<b>Expiration Date</b>	
<b>If your Certificate of Insurance or City, County, ICC or Block License has expired you MUST provide a copy with your application.</b>			

The City of Park City recognizes and will honor equivalent City of Wichita, Sedgwick County, International Code Council, International Association of Plumbing & Mechanical Officials and Block & Associates certificates as proof of qualifications. **The following individuals are authorized to sign for permits that are issued to this company:**

1. \_\_\_\_\_  
 (Print Name) (Sign Name) (Date)
2. \_\_\_\_\_  
 (Print Name) (Sign Name) (Date)

**The following individual is the Master Certificate holder responsible for compliance with the ordinances of the City of Park City, Kansas.**

_____	_____
Master (Print Name)	Signature Required
_____	_____
City, County, ICC, IAPMO or Block License No.	Expiration Date

For Office Use Only	
<b>Class of License</b>	<b>New Contractor Fee \$25.00</b> \$
<b>License #</b>	<b>2024 License Fee</b> \$100.00
	<b>Certificates at \$12.50 each</b> \$