

BUILDING DEPARTMENT

220 E. Mountain View Street, Suite A • Barstow, CA 92311 • PH. 760-256-3531

PROJECT BUSINESS LICENSE VERIFICATION FORM

This form must be completed **AS SOON AS POSSIBLE** and be submitted to the City of Barstow Building Department <u>PRIOR</u> to issuance of a building permit. The Building Department <u>WILL NOT</u> issue a building permit until all contractors, subcontractors or businesses associated with this project possess a valid City of Barstow business license. Please note that the business license, as well as the required contractor license(s), must remain in effect for the duration of the project or a **STOP WORK** order may be posted. Your cooperation in enforcing this requirement by the timely submission of this form, completed in full, will prevent unnecessary inconvenience and delays in securing a building permit, inspection, or the project final approval. Thank you.

Jobsite Address:				
Name of Contractor/Owner Builder				
Address:	City:	State:	Zip:	
State Contractors License No. (If Applicable):				
City Business License No.(If Applicable):				
Job Superintendent's Name:		Contact Phone No.:		

Trade and Professions	Business Name	Business Address	License No. / Issuing Agency (i.e. Contractor's State License Board (CSLB))	City of Barstow Business License No.
Acoustical			/	
Cabinet and Mill			/	
Concrete			/	
Drywall			/	
Electrical			/	
Engineer (Structural, Civil, etc.)			/	
Fencing			/	
Fire and Security Alarms			1	
Fire Sprinkler System			/	
Flooring			/	
Framing			/	
Glazing			/	
Grading			/	
Heating and Air			/	
Insulation			/	
Job Toilet Service			/	
Landscaping			/	
Lath			/	
Masonry			1	
Metal Sash and Door			/	

CONTINUED FROM REVERSE SIDE

License No. / Issuing Agency (i.e.

City of Barstow

Date

Trade and Professions	Business Name	Address	Contractor's State License Board (CSLB))	Business License No.
Painting and Decorating			/	
Paving			/	
Plastering			/	
Plumbing			/	
Refrigeration			/	
Roofing			/	
Septic or Sewer			/	
Special Inspector*			/	
Special Inspector*			/	
Special Inspector*			/	
Sheet Metal			/	
Steel and Iron			/	
Swimming Pool			/	
Tile Setter			/	
Welding			/	
Miscellaneous			/	
Other:			/	
Other:			/	
☐ I certify that the information	n provided above is true and	d correct to the best of r	ny knowledge.	
Gignature of Contractor or Ov	vner-Builder Printed N	ame	Date	

*Special Inspectors are required to check-in with the City of Barstow Building Department and complete a Special Inspector application and provide the required documentations/certifications <u>prior to</u> conduction of any special inspection. A copy of the special inspection report <u>must</u> also be provided to the Building Department once it has been completed by the Special Inspector. Final Inspections will not be conducted unless all special inspection reports have been submitted to the City's Building Department

Printed Name

□ I am not utilizing the services of any sub-contractor, business or professional services on this site.

Signature of General Contractor or Owner-Builder