

Trade Contractor License(s) Application for the City of Topeka

Development Services Division

620 SE Madison - Unit 6, Topeka, Ks. 66607-1118

jlilby@topeka.org

krcarr@topeka.org

Office # 785-368-3905-Opt.#3,

License Fax # 785-368-0944

Inspection/Permit Fax # 785-368-3915

Date of Application

License Type	Trade License Categories										Qty	Ea.	New	Office Use
	Electrical	Mechanical	Plumbing	Mob Hm	Solid-Fuel	Gas Fitter	Water Softner	Lawn Irrigation	Class B					
Contractor											@	253.00		
Master											@	103.00		

Applicant is to complete all information below to process license.

Designated Company Master:

Name:

Address:

City

Birth Date

Business Name:

Business Address:

City

Business Owner Info:

Birth Date

Owners Home Address

City

Home Phone #

Apt. or Lot #

Zip Code

Drivers Lic.

Contractor to complete information below

Business Name:

Business Address:

City

Home #

Drivers Lic.

Federal I.D.#

Zip Code

Total

Visa/MasterCard Payment Information



V-Code _____
Zip Code _____

Card #:

Expires:

Amount of Purchase:

Signature:

Business Phone #

Cell Phone #

Fax #

E-Mail Address:

Master or Journeyman license holders are required to earn (6) continuing education hours a year. Maximum Health or Safety hours earned = (3) hours.

Note: Contractor's are required to have a current Certificate of Insurance on file with the City of Topeka to request permits or inspections. Failure to meet this requirement will cause your license to become inactive. A \$30.00 charge to reinstate your license will be required provided you show proof of continuous coverage. T-2 6-21-11

Late Fees will apply to all license renewals if postmarked after the 14th of December.

Master, Journeyman, Apprentice License Application - City of Topeka

Development Services Division

620 SE Madison - Unit 6, Topeka, Ks. 66607-1118

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License Type: Electrical Mechanical Plumbing Mob Him Solid-Fuel Gas Fitter Water Softner Lawn Irrigation

Trade License Categories

Master											
Journeyman											
Apprentice											
Back Flow											

Backflow applicant must show proof of state certification
 Proof of Backflow re-certification exam must be provided to this office every (3) years to renew.

List Name below for: Master, Journeyman or Apprentice

Name: _____

Address: _____

City _____ State _____

Birth Date _____ Social Security # _____

Home Phone # _____ Apt. or Lot # _____

Zip Code _____ Drivers Lic. _____

List the Name of the Company you work for:

Business Name: _____

Master's and Journeyman applicants must show proof of receiving a passing grade of 75%+ from one of the following testing agencies; Block, NIA-Block, Exporior, Thomson-Prometric, Prometric. (This information must include the Test Date, Sponsor, and Score.)

Master's and Journeyman having received a passing grade of 75%+ from (ICCI) International Code Council in your trade must provide the City of Topeka with Proof of Time in Trade and proof of passing the exam. (This information must include the Test Date, Sponsor, and Score.)

Apprentices must register with the City of Topeka. They must work under the direct supervision of a Journeyman or Master. They are not to be left alone at the worksite.

Work Ratio: Electrical 1-1, Mechanical 1-2, Plumbing 1-1.

City _____ Ea. _____ New _____ Office Use _____

@ 103.00

@ 53.00

@ 33.00

@ 53.00

Total

Visa/MasterCard Payment Information

VISA V-Code _____

Discover M/C Zip Code _____

Card #: _____

Expires: _____

Amount of Purchase: _____

Signature: _____

Business Phone # _____

Cell Phone # _____

Fax # _____

E-Mail Address: _____

Master or Journeyman license holders are required to earn (6) continuing education hours a year. Maximum CEU's for Health or Safety hours earned = (3) hours.

Late Fees will apply to all license renewals if postmarked after the 14th of December.

Trade Contractor's

Master, Journeyman, and Apprentice Applications

Acceptable examination results for Master's and Journeyman".

Master's and Journeyman applicants: must show proof of receiving a passing grade of 75%+ from one of the following testing agencies; Block, NIA-Block, Exporior, Thomson-Prometric, Prometric. (Exam information must include the Test Date, Sponsor, Location, and Score.)

Master's and Journeyman applicants: If you have taken an exam from the ICC – International Code Council you must provide the City of Topeka with proof of notarized time in trade and proof of passing the exam with a 75%+. *The Time in Trade form is included in this packet. The ICC exam must be comparable to the exams given by Prometric for the City of Topeka. (Exam information must include the Test Date, Sponsor, Location, and Score.)

Allowable Exam Types: Master Electrical, Journeyman Electrical

Unlimited Air Conditioning (Master), Air Conditioning Journeyman, Sheet Metal Journeyman,
Master Plumbing with Gas, Journeyman Plumbing with Gas

Apprentices must register with the City of Topeka. They must work under the direct supervision of a Journeyman or Master. They are not to be left alone at the worksite.

Work Ratio: Electrical 1-1, Mechanical 1-2, Plumbing 1-1.

Work Ratio is enforced. All tradesmen are to have the appropriate identification and license for their trade when carded by an inspector.

To Schedule an Exam:

Applications to take the Master or Journeyman exam can be obtained by contacting the Development Services Office at 620 SE Madison, Topeka, Kansas, 66607-1118. Or call customer Service 785-368-3905 Opt. # 3.

Submit the completed packet of information to take the Prometric Exam with a \$50.00 non-refundable payment for trade board review. The sponsor signed application will be returned to you to forward your paperwork to Prometric and schedule your test date. Prometric will send you a letter of time and location of your exam. The first time issuance of your license will be at no charge to you. Renewal fees apply by deadline of December 14th.

To take the ICC Exam for Trades you can contact www.iccsafe.org or contact Pearson View 1-877-234-6082 for registration by phone or go to their website www.pearsonvue.com to register on-line. There are multiple locations available for testing.

All examinations require a 75%+ passing score.

Important Information

All licenses must be renewed by 14th of December to avoid late fees. Attention Trade Contractor's your designated master's or journeyman are required to obtain (6) continuing education hours a year to qualify for renewal with the City of Topeka. A maximum of (3) hours can be earned in Safety/Health classes, the other (3) hours must be earned in your trade.

Certificates of insurance are required to remain current and a copy provided to this office to avoid your license becoming inactive. After an industry standard (30) day grace period has passed, a \$30.00 reinstatement fee will be required to re-activate your license if a certificate of insurance is not provided to this office on or before the date of expiration. We will accept certificates of insurance by fax, e-mail, or mail.

Change of address notification is a responsibility of the contractor. A \$10.00 return mail fee will be charged to the contractor if notices or license renewals are returned. Please notify us of any change in address as the Postal Service does not forward our mail. Call (785) 368-3905 #3.

Continuing Educational Hours – Training Calendar

To view offered CEU Classes click on our website Click on = www.topeka.org, Click on A-Z, Click on License-Contractor, Click on Training Calendar for Contractors CEU's.

Look for classes that will fill your needs to qualify for your yearly renewal with the City of Topeka.

Licensing Process

Complete all forms

Include your Passing Certification and Certificate of Insurance with packet. Complete all forms.

Include your Certificate of Liability Insurance with packet. Certificate Holder Section must read as follows: City of Topeka, Development Services, 620 SE Madison Unit 6, Topeka, Ks. 66607

If you are not required to have State of Kansas Workers Compensation Coverage then access our website and download an affidavit. Sign, Notarize and include in fax. Go to our website: www.topeka.org, Click on A-Z, Click on License-Contractor, in the middle of the screen and download the appropriate document that applies to your business. Submit this document with your application as well. Fax all documents to 785-368-0944 or e-mail to lfilby@topeka.org. Contact 785-368-1616 if you have any questions.

PAYMENT

You can pay for your license with a credit card (VISA, MC, or Discover). There is a place on the application for you to complete this portion.

If all is correct, the license(s) will be created and mailed with credit card receipt.

You will receive an e-mail when license(s) are completed and you are ready to start work.

Contacts with Development Services

You can contact this office to apply for Building Permits @ 785-368-1631.

Plan Reviewer = Fran Hug 785-368-1613 or fhug@www.topeka.org

Plan Reviewer = Craig Thornburg 785-368-1612 or cthornburg@topeka.org

To schedule an inspection for next day inspection with Kitty call 785-368-3905 Opt. 1,
Hours 8am – 4:00 pm. Customer Service Questions = 785-368-3905 Opt. 3.

Once license is issued – remember to call for you
Permits and Inspections that will eventually include
your final and Certificate of Occupancy if required.

***** All trade contractors are to be licensed and
pull permits to do work in City.**

Please list permit # if issued. Check Type of Request.

Permit # _____ Inspection _____

Building

Electrical

Mechanical

Plumbing

Solid Fuel

Mobile Home

CCT

Lawn Irrigation

Please Circle the Trade Types that apply to this request.

Please Circle:

Residential

New/Rem

Commercial:

New/Rem

Address of Job:

Apt./Mobile Hm
Court Main
Address

Apt. #, Floor or Suite #

Main Address must be provided for multiple addresses in any complex.

Please Circle one of the following or add additional information

Access to Building

Lock Box # _____

Open

Vacant

Key Located _____

"Very Important - Please Read"

Schedule Inspections with your customers
A.M. Inspection = After 9:00 By 11:30
P.M. Inspection = After 1:00 by 4:00

Provide Field Contact, Phone or Call # for Inspector

Name _____

Cell # _____

What kind of work are you going to do at this location?

What kind of inspection do you need?

Contractor Name: _____

Phone # _____

Call Plumbing Inspector at least (1) hour before you are ready for sewer or water service installations.

Would like City to inspect on -> -> ->

Date: _____

A.M.

P.M.

Must provide commercial costs for projects not requiring a Bldg. Permit

Plumbing Inspector Cell Phone Numbers:
Bruce Pfeiffer #806-0161 Terry Canady # 806-0163

Commercial Job Cost: \$ _____

Commercial Job Cost Reference

Ck Box

City

Inspector Assigned to Job: _____ Date Scheduled _____

Service Fees

City

Re-Inspection: corrections/no access

\$50.00

On-site Counsel "no-permit"

\$50.00

Time or Same Day Inspection

\$50.00

Fire Alarm Test/Insp. per Inspector

\$50.00

Fax Requests must be received before 3:30 p.m. to be on next day schedule!

Commercial Permit w/o Bldg Permit - < \$200K

Commercial Permit w/o Bldg. Permit - \$200K-\$500K

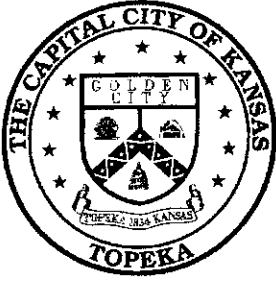
Commercial Permit w/o Bldg. Permit - > \$500K

A/C - Self Inspection Sheet

Water Heater - Self Inspection Sheet

Re-Instatement of License: Failure to provide C Of I-Pay Bills by Deadline or Notify Change of Address.

\$30.00



CITY OF TOPEKA

Development Services
620 SE Madison Unit 6
Topeka, KS 66607-1118
Tel: (785) 368-3905-#3



Miriam Berke, Manager
Email: mberke@topeka.org
Fax: (785) 368-3915
www.topeka.org

Master Verification

I _____ certify that as a designated master, I am a full-
Name of Mater

time employee for _____ and responsible for all code specific
trade work. Name of Company Licensed with COT

"Sign below and complete only the area that applies to your license type"

Please Circle the following trade that applies to your area of responsibility:

Electrical	Mechanical	Plumbing	Mobile Home	Lawn Irrigation	Gas Fitting	Solid Fuel	Water Softener
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I understand it is my responsibility to contact the Development Services Office @ 785-368-3905 Opt # 3 in the event my employment is terminated with this company.

Signature of Designated Master

Date

This document to be submitted with new application or license renewals



CONTRACTOR CERTIFICATION
THAT OCCUPANT OF PRE 1978 PROPERTY HAS BEEN PROVIDED A
“PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME” PAMPHLET

I, the undersigned mechanical, plumbing, or electrical trade contractor, or commercial or residential contractor, shall provide the occupant of any residence located in the City of Topeka, which was originally constructed before 1978 and for which I obtain a permit for performing work, with a copy of the United States Environmental Protection Agency pamphlet titled, “Protect Your Family from Lead in Your Home.” I understand that failure to provide the referenced pamphlet to an occupant may result in the suspension or revocation of my contractor license.

Signature of Contractor

Printed Name of Contractor

Company Name –Licensed with City

Date

Contact the EPA for pamphlets # 785-368-7154
1000 SW Jackson, Suite 330
Topeka, KS 66612

This form must be signed and returned to the Development Service Office for
your contractor license to be issued

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
00/00/00

INSURANCE AGENCY NAME
ADDRESS
CITY, STATE ZIP CODE
PHONE & FAX NUMBERS

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

CONTRACTOR'S BUSINESS NAME
BUSINESS ADDRESS
CITY, STATE ZIP CODE

INSURERS AFFORDING COVERAGE

INSURER A:	INSURANCE COMPANY NAME	NAIC #
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

MARK CODE / LTR. SYMBOL	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC	POL#xyz0000000	00/00/00	00/00/00	EACH OCCURRENCE EXCESS TO PERTINENT POLICIES (Per occurrence) \$ 000,000.00 MED EXP (Any one person) \$ 000,000.00 PERSONAL & ADV INJURY \$ 000,000.00 GENERAL AGGREGATE \$ 000,000.00 PRODUCTS - COMP/OP AGG \$ 000,000.00
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - BI ACCIDENT \$ OTHER THAN AUTO ONLY: BI ACC \$ AGE \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	Garage Liability <input type="checkbox"/> ANY AUTO				
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Yes, describe under SPECIAL PROVISIONS below OTHER	ONLY AS REQUIRED BY KANSAS LAW POL#xyz0000000	00/00/00	00/00/00	INC. DISEASE - EMPLOYEE \$ 000,000.00 INC. DISEASE - POLICY LIMIT \$ 000,000.00

*SAMPLE
C of I
Please be sure all areas
circled are completed.
Thank you.*

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 RESIDENTIAL CONTRACTOR, GENERAL CONTRACTOR I, II, ROOFING, EXCAVATING, ETC. (WHATEVER THE CONTRACTOR IS LICENSED TO DO)

CERTIFICATE HOLDER
 CITY OF TOPEKA
 DEVELOPMENT SERVICES
 620 SE MADISON ST UNIT 6
 TOPEKA, KS 66607-1118

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
 SIGNATURE OF INSURANCE AGENT

2/16/09