

WEST VALLEY CITY - BUILDING INSPECTION DIVISION
CONTRACTOR VERIFICATION FORM
ATTENTION

FILL OUT THE CONTRACTOR'S NAME, (*the way it is licensed with the State*), no DBA's, no first names only and no last names only. USE THE CORRECT, LEGAL NAME. IF THIS FORM IS NOT COMPLETED CORRECTLY, IT WILL BE RETURNED TO YOU. ALL CONTRACTORS SHOULD SIGN **ONE** FORM. IN ORDER TO CLEAR POWER AND/OR ISSUE A CERTIFICATE OF OCCUPANCY AND/OR RELEASE YOUR BOND, THIS FORM MUST BE TURNED IN CORRECTLY. **NOTE: STATE LAW PROHIBITS HOME BUYERS FROM PERFORMING PLUMBING OR ELECTRICAL WORK FOR SWEAT EQUITY**

PERMIT # _____ ADDRESS: _____

SUBDIVISION: _____ LOT# _____

COMMERCIAL _____

PROJECT: CONTACT _____ PHONE # _____

NAME:

	CONTRACTOR NAME AS LICENSED WITH THE STATE		STATE CONTRACTOR LICENSE NUMBER		AUTHORIZED SIGNATURE
GENERAL CONTRACTOR					
**OFFICE USE	<i>CONTRACTOR CLASSIFICATION</i>		<i>EXPIRATION DATE</i>		
MECHANICAL CONTRACTOR					
**OFFICE USE	<i>CONTRACTOR CLASSIFICATION</i>		<i>EXPIRATION DATE</i>		
ELECTRICAL CONTRACTOR					
**OFFICE USE	<i>CONTRACTOR CLASSIFICATION</i>		<i>EXPIRATION DATE</i>		
PLUMBING CONTRACTOR					
**OFFICE USE	<i>CONTRACTOR CLASSIFICATION</i>		<i>EXPIRATION DATE</i>		

****OFFICE USE**** VERIFIED BY: _____ DATE: _____