BUILDING SAFETY DIVISION
2101 O'NEIL AVENUE, ROOM 202 ● CHEYENNE, WY 82001
Email: building@cheyennecity.org ● Phone: (307)637-6265
Visit Our Website: www.cheyennecity.org
A COMMUNITY OF CHOICE

Contractor License Notary Affidavit

Please complete the following:

I_____ attest that the Contractor Licensing Application information is completed correctly to the best of my knowledge.

By signing this document, I attest to the fact that I am applying for a Contractor License. I hereby claim to be qualified for the attached Contractor License.

I also acknowledge that as the applicant, I am solely and personally responsible for any violations of the Contractor Licensing Rules and Regulations, **and that I can be prosecuted for any code violations, and/or contractor licensing regulations, that are not corrected as ordered by the City.**

TO BE SIGNED IN THE PRESENCE OF A NOTARY:

Signature: _____ Printed Name: _____ Date: _____

Witness my hand and seal:
State of _____
County of _____
The foregoing instrument was acknowledged before me this _____ day of _____, 20_____.

Notary Public: _____
My commission expires: _____