

# General Contractor License Application

Belle Fourche Municipal Code 15.20

City of Belle Fourche

Engineering Department

511 6th Avenue, Belle Fourche, SD 57717

Phone: 605-892-3006

Email: hailey@bellefourche.org

Application Date: \_\_\_\_\_

For the Calendar Year of 2025

Name of Business: \_\_\_\_\_

New or Renewal Licence? \_\_\_\_\_ Contact Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City

State/Zip

Mailing Address: \_\_\_\_\_

City

State/Zip

Business Phone Number: \_\_\_\_\_ Cell Phone Number (optional): \_\_\_\_\_

Business Email Address: \_\_\_\_\_

SD Excise Tax Number (XXXX-XXXX-ET): \_\_\_\_\_

## Specialty of Work

Concrete

Fencing

Insulation

New Const.

Signs

Drywall

General Const.

Interior

Painting

Tree/Lawn Care

Excavation

HVAC

Masonry

Roofing/Siding

Windows/Glass/Doors

Other If other, please describe: \_\_\_\_\_

## Submit Certificate of Liability Insurance:

Certificate of public liability of insurance in the following amounts:

- \$1,000,000 per occurrence,

- \$2,000,000 aggregate,

- \$1,000,000 personal/adv injury

The certificate holder is "City of Belle Fourche Engineering Department, 511 6th Avenue, Belle Fourche, SD 57717".

Insurance is required under Section 15.12.050.

Name of Insurance Company: \_\_\_\_\_

Insurance Expiration Date

Insurance Company Phone Number: \_\_\_\_\_

**Please ensure your insurance company understands they are to email or mail updated certificates, at the time of expiration, to the Engineering Administrative Assistant at hailey@bellefourche.org**

If granted a contractor's license, I agree to comply with all current building codes and building regulations or amendments thereto, as adopted by the State of South Dakota and the City of Belle Fourche.

\_\_\_\_\_  
Signature of Applicant

For Engineering Office use only - Please do not fill out

New License Fee: \$100.00

Charge: \_\_\_\_\_

Renewal License Fee: \$100.00 (if renewed after 12/31/2024)

Check #: \_\_\_\_\_

Renewal License Fee: \$75.00 (if renewed by 12/31/2024)

Cash: \_\_\_\_\_

Date License Issued: \_\_\_\_\_ Receipt # \_\_\_\_\_ License Number: \_\_\_\_\_