

Utility Contractor Pre-Approval Application

Type of authorization applied for (check only one):

Water Contractor Only:

Sewer Contractor Only:

Water & Sewer Contractor:

Applicant Email :

Name of Applicant: _____
(LAST) (FIRST) (MI)

Home Address: _____
(STREET) (CITY) (STATE) (ZIP)

Date of Birth: _____ Phone #: _____
(MO) (DAY) (YEAR)

ATTACH COPY OF PHOTO I.D. TO THIS APPLICATION (Application will be returned if photo I.D. is not provided)

Current Employer: _____ Phone #: _____

Employer Address: _____
(STREET) (CITY) (STATE) (ZIP)

Do you hold or have you ever held any of the above authorization/licenses with any Municipality? Yes No

If yes, what municipality, what type and what years?
(attach additional sheet if needed to provide all information) _____

Have any of the previous authorizations/licenses ever been suspended or revoked? Yes No

If yes, please explain:
(attach additional sheet if needed to provide all information) _____

List your work experience for each of the licenses applied in accordance with City Code 4114.505. Omit temporary employment.

Name of Employer	Contact Name	Phone Number	Approximate Start & End Dates	Description of Work/Duties

Application needs to be complete and accurate. **ATTACH ADDITIONAL SHEET IF NEEDED TO PROVIDE ALL INFORMATION.**
I do hereby certify that I am familiar with the Codes and Specification requirements of Columbus City Code 4114.505 and the above information is correct to the best of my knowledge.

Signature of Applicant: _____ Date: _____

DO NOT WRITE BELOW THIS LINE – CITY OF COLUMBUS USE ONLY

Department Committee Approval Yes No

Signature: _____
Review Committee Board Member