



AFFIDAVIT OF INSURANCE



This affidavit must be completed and on file with the City of Aspen/Pitkin County Community Development Departments before any Contractor License will be issued.

I, _____ of _____

Company Owner/Owner's Authorized Representative

Company Name

at _____

Street Address

City

State

Zip Code

hereby swear and affirm that I will maintain workers' compensation insurance, if required by law, and general liability insurance with a minimum limit of not less than \$500,000 for one person and \$1,000,000 for any one accident, and property damage insurance with a minimum limit of not less than \$300,000 for any one accident during the time I perform any construction activities in the City of Aspen or Pitkin County. I also agree to produce proof of such insurance whenever the City of Aspen or Pitkin County requests.

PRINT NAME

SIGNATURE

DATE

By signing above, I understand and agree with the aforementioned statement.

We no longer require or accept Certificates of Liability Insurance as part of the application to become a Licensed Contractor. This affidavit is all that is required. If your insurance company automatically sends us Certificates of Liability Insurance, please contact them and ask them to discontinue that practice.

See page 2 for required Notary Stamp on this form

STATE OF COLORADO)
) S.S. SEAL
CITY OF _____ AND COUNTY OF _____)

Subscribed and sworn to before me on this _____ day of _____, 20_____

NOTARY PUBLIC: _____ My Commission expires: _____