



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)
)
CITY OF _____AND COUNTY OF _____)

S.S.

SEAL

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

NOTARY PUBLIC: _____ My Commission expires: _____