Routt County Building Department Contractor Registration Form	
Company Name: Potra General Cont	
Owners First/Last Name: Rodnes M=Gowen	
Owners Phone Number: 970-819-C158 Owners Email: City, State, Zip: Pet msen co a smail. com Hayden Co 81C39 If a company has an Employee who carries the required Contractor Certification or State Certification then you must fill out the Employee Information below:	
Employee First/Last Name:	
Employee Phone Number:	
Employee Email:	
Mandatory NOTE: Employees Must Attach Proof of Employment and may only represent one Company	
Total Number of Company Employees:	
Contractor Trade	
Unlimited Commercial Contractor:	Light Commercial Contractor:
Residential Home Builder:	Mechanical Contractor:
Roofing Contractor:	Electrical Contractor:
Plumbing Contractor:	Manufactured Home Installer:
Owner/Company Legal Responsibility Statement: At this time I have provide accurate information on the total number of employees and have attached proof of the required State Workmen's Compensation Insurance for the company, and understand I must update this information if the company hires additional employees or reduces employees. All information provided on this application is true and accurate on the date signed below.	
Owners Printed Name: Rodnes 13 M=Gowrn Insurance and Exam Certificate Attached:	
Owners Signature:	Date: 2/9/21

ROUT County Regional Building Department

136 6th Street, Ste 201, Steamboat Springs, CO 80487 PH: 970-870-5566 Fax 970-870-5489 Email: Building@co.routt.co.us