



Regional Building Department
830 N Main St Suite 100
Pueblo CO 81003
719-543-0002 Fax 719-543-0062
www.prbd.com

Contractor Name Change Application

Date: _____

I am requesting a name change of our company name on our contractor license as follows.

Current company name and information

Name of Examinee/License Holder: _____

Company Name: _____

PRBD License Number: _____

Type of License: _____

NOTE: No name change can be completed without a current copy of the company's insurance certificates with the new name.

NEW Company name and information.

Company Name: _____

Type of License: _____

Telephone Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Signature and Title