



State of Idaho
Division Of Occupational and Professional Licenses
Public Works Contractor Board

BRAD LITTLE
Governor
RUSSELL BARRON
Administrator

11341 W Chinden Blvd.
P.O. Box 83720
Boise, ID 83720-0063
(208) 334-3233
dopl.idaho.gov

Public Works - Work Verification Form

Applicant Information (Must be completed by applicant)

Company/Individual Name: _____

Categories Selected for Licensure: _____

Project Details (Must be completed by verifier)

Please provide a synopsis of work the applicant performed for you. Work described must relate to all categories notated above. Any work described must have been completed within 3 years from the date of this verification. You may attach additional pages as needed.

Date range of the projects completed above: _____

Rate the quality of work performed: Satisfactory Unsatisfactory

Verifier Information

Name: _____ Phone Number: _____

Company Name (if applicable): _____

Signature

Date