CONTRACTOR REGISTRATION APPLICATION



05/2015

PLEASE PRINT CLEARLY P.O. Box 245 Canton, TX 75103

Phone: 903-567-1841 Fax: 903-567-1793

TON, ID				Date:	
Contractor Type: General Contractor Backflow Tester Pool Contractor Fire	□ Mechanical□ Irrigation□ Energy Inspector□ Other	□ Electrical □ Fence □ Concrete		□ Plumbing □ Foundation □ Sign/Electrical	
You must attach a copy of your Texas Driver's Licer calibration certification f	ise, and a copy of your l	liability insurance. B	license, Back Backflow teste	flow license, a curre ers must attach a co	ent copy of py of their
Company Name:Owner/Officer/License License No:		Title:			
Officer of the company is State Plumber, Mechanic being performed under t	cal, or Electrical License	. This person will be	held respons	sible for seeing that	all work
Address:	City	y:	ST:	Zip:	
Office Phone:Email:	Fax	ß	Cell: _		
Personnel authorized to	obtain permit under th		·		
Original Signature of Owne	r, Officer or License Hold	er F	Printed name o	f Owner, Officer or Li	icense Holder
This form must be notari registering by mail, you n Registration is valid for o REGISTERED. NO RENEW	nust include a self-addr ne year from date of iss	essed envelope to r	eceive a recei	pt of payment by re	eturn mail.
The State of Texas					
County of					
Subscribed and sworn to	(or affirmed) before me	e on this day	of	_, 20, by	7.5
appeared before me.	, proved to	me on the basis of s	atistactory ev	ridence to be the pe	erson(s) who
(Seal)					
See		0		Notary Public	