



CONTRACTOR REGISTRATION

Business Name _____

Address _____

City _____ ST _____ ZIP _____

Phone _____ Fax _____

E-Mail _____

Personnel Authorized to Obtain Permits:

Name Title

Name Title

Signature of Owner or Authorized Personnel Date

TYPE:

- General
- Plumbing
- Electrical
- HVAC
- Mechanical
- Irrigation
- Backflow Test
- Fence
- _____

License Number (Copy Required)

FEE IS \$50.00

Registration is valid for two years. You will be listed on the contractor's active registration list posted in the City Hall lobby. You may place your business cards on the bulletin board.

[THIS SECTION TO BE COMPLETED BY CITY PERSONNEL]

Date Paid _____

Amount Received _____

Received by _____

Registration will expire on _____
(Two years from application date.)

CONTRACTORS: Please be advised if you, or any subcontractors, damage City property, which includes the streets, you will be expected to pay for repairs or provide insurance information so a claim can be filed.