



CONTRACTOR REGISTRATION FORM

TYPE OF CONTRACTOR LICENSE

_____ ELECTRICAL CONTRACTOR
_____ MASTER ELECTRICIAN
_____ JOURNEYMAN ELECTRICIAN
_____ MASTER SIGN ELECTRICIAN

_____ MECHANICAL (HVAC)

_____ IRRIGATOR (LANDSCAPE)
_____ BACKFLOW TESTER

_____ MASTER PLUMBER
_____ JOURNEYMAN PLUMBER

_____ OTHER (specify) _____

_____ OTHER (specify) _____

CONTRACTOR INFORMATION

COMPANY NAME: _____

PHONE: _____

COMPANY ADDRESS: _____

CITY, STATE, ZIP: _____

LICENSEE NAME: _____

LICENSEE NUMBER: _____

PHONE: _____

ADDRESS (MAILING): _____

CITY, STATE, ZIP: _____

SIGNATURE: _____

DATE: _____

YOU MUST PROVIDE A CERTIFICATE OF LIABILITY INSURANCE WITH THE CITY OF CRANDALL LISTED AS THE CERTIFICATE HOLDER

Provide a copy of your drivers license and State trade license below.
