



# City of Stafford

2610 South Main  
Office Number (281) 261-3940

Stafford, Texas 77477  
Fax Number (281) 261-3939

## Contractor Registration Form

**Type of Contractor:** (PLEASE CHECK ONE) **Registration valid for one year from date of issuance**

General	Mechanical	Plumbing (No Fee)	Electrical	Roofing
Irrigation	Sign	Fire Alarm/Sprinkler	Drain Layer	Homeowner/Other

Please provide the following:

1. Valid -Texas Drivers License
2. Original State License for copying
3. Original State Registration for copying
4. Copy of Insurance Certificate\* made out to the City of Stafford
5. \$100.00 Cash, Credit Card or check made out to the City of Stafford

**Please Print or Type**

Licensed Individual:		TDL #:
Home Address:		Phone #:
City:	State:	Zip Code:
State License Number (if applicable):		Expiration Date:

### Business Information

Contractor Company Name:		Office Phone #:
Owner Name:		Cell Phone #:
Mailing Address:		Fax #:
City:	State:	Zip Code:
		Your Position:

### List All Persons Authorized To Purchase Permits Under Your Registration

1.	TDL #:
2.	TDL #:
3.	TDL #:

Email Address:		
	Contractor Registration Fee	\$100.00
Accepted by:	Receipt #	

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

\* Liability Insurance

All contractors are required to maintain at least the minimum general liability insurance coverage at all times to satisfy proof of financial responsibility