



New/Renewal Contractor Application

Building () Electrical () Plumbing () Mechanical () Sign ()
Mover/Demolish () Other ()

Company Name: _____

Company's Address: _____ City: _____ Zip-Code: _____

Phone No.: _____ Fax No.: _____

Email: _____

Company Owner: _____

Home/Cell Phone Number: _____

Owner's Signature: _____ Date: _____

The foregoing information is true and correct as submitted by the undersigned applicant.

Additional Personnel to pull permits will need a notarized letter. That person must be present at all times when applying for a permit.

Authorized Agent: _____

Name: _____

Address: _____

Phone No.: _____

Note: If Liability Insurance and/or State License are not up to date please bring/fax a copy to our office. Fax No. is (956) 464-6921 Attn. Lizzie Delgado. Direct line (956) 464-6911.

Note: Upon applying there will be a \$100.00 fee.