CITY OF COLLEGE STATION
*Planning & Development Services*

1101 Texas Ave.
College Station TX. 77840
(979) 764-3570
(979) 764-3496 Fax

# APPLICATION FOR CONTRACTOR REGISTRATION

TYPE OF CONTRACTOR

☐ GENERAL ☐ MECHANICAL ☐ IRRIGATION ☐ PLUMBING ☐ ELECTRICAL ☐ ELECTRICAL SIGN ☐ FIRE

COMPANY NAME: ______________________________

CONTACT NAME OR LICENSE HOLDER: ______________________________

LICENSE/REGISTRATION #: ______________________________

STREET ADDRESS: ______________________________

CITY: ____________________ STATE: ____ ZIP CODE: __________

PHONE: ____________________ CELL: ____________________

FAX: ____________________

EMAIL: ______________________________

Are there any other person(s) authorized to request inspections? ____________________
If yes, please list them: ______________________________

______________________________

______________________________

I hereby make application to the **City of College Station** for a Contractor Registration. I certify that the above statements are true and correct. I understand that the application fee of $60.00 is non-refundable. I further understand that the provision of false information on this application may result in the revocation of this registration by the **City of College Station**.

Signature of Applicant: ______________________________ Date: ____________________

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*Official Use Only*

City Of College Station Number: ____________________ Exp. Date: ________________

State License Number: ______________________________ Exp. Date: ________________

Billing Information: Tax ID# ________________ Soc. Sec. # ____________________

Processed by: ____________