

## CITY OF NEW FAIRVIEW 999 ILLINOIS LANE NEW FAIRVIEW, TX 76078 PHONE#: 817-638-5366

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## **CONTRACTOR REGISTRATION FORM**

## PLEASE CHECK THE APPROPRIATE BOX BELOW:

| ELECTRICAL HVAC PLUMBIN     | G - (No fee required) BACKFLOW TESTE | R |
|-----------------------------|--------------------------------------|---|
| IRRIGATOR GENERAL CONTRAC   | CTOR HOME BUILDER                    |   |
| FENCE CONTRACTOR POOL CON   | TRACTOR SIGN CONTRACTOR              |   |
| ENERGY INSPECTOR OSSF MAINT | ENANCE PROVIDER OR INSTALLER         |   |
| COMPANY NAME:               |                                      |   |
| ADDRESS:                    |                                      |   |
| PHONE#:                     | FAX#:                                |   |
| EMAIL:                      |                                      |   |
| LICENSE HOLDER'S NAME:      |                                      |   |
| DRIVER'S LICENSE#:          | EXP DATE:                            | _ |
| PROF. LICENSE#:             | EXP DATE:                            | _ |
| HOME ADDRESS:               |                                      | _ |
| HOME PHONE#:                |                                      |   |
| LIABLITY INSURANCE CO:      |                                      | _ |
| EXPIRATION DATE:            |                                      |   |
| CICNIATUDE.                 | DATE.                                |   |

PLEASE SUBMIT A COPY OF THE PROFESSIONAL LICENSE AND DRIVER'S LICENSE OF THE OWNER OR PERSON RESPONSIBLE FOR OVERSEEING THE PROJECT. THE INDIVIDUAL SIGNING THIS FORM WILL BE RESPONSIBLE FOR ADHERING TO THE CODES AND ORDINANCES OF THE CITY OF NEW FAIRVIEW.

| S | T | CT | OI | N REI | OW TO | RE | COMPI | FTFD | $\mathbf{RV}$ | OFFICE | PERSONNEL: |
|---|---|----|----|-------|-------|----|-------|------|---------------|--------|------------|
|   |   |    |    |       |       |    |       |      |               |        |            |

| ISSUE DATE: | EXPIRATION: |
|-------------|-------------|
| ISSUED BY:  | FEE PAID:   |