One Troyan Drive Meadows Place, Texas 77477
Permit Department 281- 983-2932 (9am-4pm M-F) Fax Number 281- 983-2940
Email: permits@cityofmeadowsplace.org

Contractor Registration Form

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

General ___		Mechanical ___	Plumbing ___	Electrical ___	Roofing ___
Irrigation ___	BPAT _____	Sign ___	Fire Alarm/Sprinkler ___	Drain Layer ___	Homeowner/Other___

Please provide the following:

1. Texas Drivers License
2. Original State License
3. Original State Registration
4. Copy of Insurance Certificate made to the City of Meadows Place faxed or emailed from the **insurance company**.
5. $100.00 Cash**,** credit card or check made to the City of Meadows Place

Office Use Only: Registration #: _____
____ Paid $____ Cash $_____ $Check _____Mail
Expiration Date: _____

Please Print or Type

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

Business Information

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

Email Address:

_____All permits must be posted on jobsite **Initial**

_____ No contractor signs may be posted on jobsite **Initial**

No Refunds – This registration is non-transferable

List Persons Authorized To Purchase Permits Under Your Registration

1.	TDL #:
2.	TDL #:
Email Address:	

Applicant's Printed Name Date Applicant's Signature

Liability Insurance:

All Contractors are required to maintain general liability insurance coverage. The Insurance must have:
Public liability Insurance to the extent of $ 500,000.00 for any one accident and $100,00.00 for any one person and
Property damage insurance to the extent $ 100,000.00 for any one accident and $500, 00.00 in the aggregate