



## CONTRACTOR REGISTRATION

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> General Contractor  | <input type="checkbox"/> Irrigation Contractor | <input type="checkbox"/> Demolition Contractor |
| <input type="checkbox"/> Concrete Contractor | <input type="checkbox"/> Fence Contractor      | <input type="checkbox"/> Sign Contractor       |
| <input type="checkbox"/> Fire Contractor     | <input type="checkbox"/> Mechanical Contractor | <input type="checkbox"/> Electrical Contractor |
| <input type="checkbox"/> Plumbing Contractor | <input type="checkbox"/> Roof Contractor       |  |

### CONTRACTOR INFORMATION

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Ste. #: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### BUSINESS INFORMATION

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Ste. #: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### REQUIRED ITEMS

- A completed copy of this application
- A copy of your State Trade License (if applicable)
- A copy of your State Driver's License
- A copy of the Company's General Liability Insurance

I hereby certify by my signature below that: 1) I possess and will maintain all required licenses certifying that I am properly credentialed to do the work, 2) I agree to abide by all laws and ordinances governing this type of work whether specified herein or not, and 3) I have read and examined this application and know the same to be true and correct.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Please submit to [permits@roanoketexas.com](mailto:permits@roanoketexas.com) with supporting documents.

City of Roanoke | 500 S. Oak Street | Roanoke, TX 76262 | 817-490-1308