

# City of El Lago

98 Lakeshore Drive  
El Lago, TX 77586  
City Hall 281-326-1951 Fax 281-326-0165

# CONTRACTOR REGISTRATION

## Company Information

Company Name to List on Registration \_\_\_\_\_

List any d.b.a.(s) \_\_\_\_\_

*(If this company does business under more than one name, a separate registration must be obtained for each name under which the contractor is doing business)*

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

After Hours Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Federal ID # \_\_\_\_\_ - \_\_\_\_\_

If a sole proprietorship, social security number is required:

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

## Personnel Authorized to Obtain a Permit Under this Business Name

(use company letterhead for additional names):

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Products or Services Sold \_\_\_\_\_

**THE REGISTRATION FEE OF \$50.00 MUST BE PAID BEFORE A REGISTRATION NUMBER WILL BE ISSUED**

Owner/Officer Name \_\_\_\_\_ Title \_\_\_\_\_

*(Officer – i.e., President, Vice President, CEO: This person will be held responsible for seeing that all work being performed under this registration is completed and in compliance with City and State Code)*

*I hereby affirm that I am duly authorized to execute this document on behalf of this employer. All information contained in this application is true and correct. I understand that if this company does business under more than one name, a separate registration must be obtained for each name under which the contractor is doing business.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

DO NOT WRITE IN THIS BOX, FOR OFFICE USE ONLY

Date of Application \_\_\_\_ / \_\_\_\_ / 20\_\_

Certificate of Liability Insurance: Date Received \_\_\_\_ / \_\_\_\_ / 20\_\_ Expiration \_\_\_\_ / \_\_\_\_ / 20\_\_

Master Licenses Required \_\_\_\_\_ Plumbing \_\_\_\_\_ Electrical \_\_\_\_\_ {SEAL}

\$50 Fee: Date Rec'd \_\_\_\_ / \_\_\_\_ / 20\_\_ PAID BY: CASH \_\_\_\_\_ CHECK # \_\_\_\_\_

Registration Authorized By \_\_\_\_\_

City Secretary / Deputy City Secretary

EXPIRATION—End of Year 2010

**REGISTRATION NO. CR-10-\_\_\_\_\_**