

# *City of Shawano Park*

## **INSTRUCTIONS FOR STATE LICENSED CONTRACTOR REGISTRATION FORM**

This form is an application for registration of State Licensed Contractors for the purpose of obtaining:

- 🕒 HVAC permits
- 🕒 Electrical permits
- 🕒 Plumbing permits
- 🕒 Fire Sprinkler permits
- 🕒 Fire Alarm permits
- 🕒 Irrigation permits
- 🕒 Backflow permits
- 🕒 Septic system permits

### **REQUIREMENTS:**

- 👉 HVAC and Master Plumbers
  - Copy of a valid Texas driver's license
  - Copy of valid State of Texas issued license in their field of expertise
  - Copy of Certificate of Liability Insurance
  
- 👉 Electrician and Master Electricians
  - Copy of a valid Texas driver's license
  - Copy of valid State of Texas issued Master Electrician's license
  - Copy of Certificate of Liability Insurance
  
- 👉 Fire Sprinkler, Fire Alarm, Irrigation, Backflow and Septic System
  - Copy of valid Texas driver's license
  - Copy of valid State of Texas issued license in their field of expertise
  - Copy of Certificate of Liability Insurance

**All forms and copies must be presented in person to the Building Department.**

Registration is valid for one (1) year. Licenses must be presented in person. Insurance can be mailed or faxed to the Building Department prior to their expiration or presented in person for proof of renewal.

*City of Shavano Park*

**STATE LICENSED CONTRACTOR REGISTRATION**

Type of Contractor:       HVAC                       Electrical                       Plumbing  
    Irrigation                       Backflow                       Water Treatment  
    Septic System                       Fire Alarm                       Fire Sprinkler

Company Name: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Office/Home phone: \_\_\_\_\_ Cell/Mobile phone: \_\_\_\_\_ E-

Mail Address: \_\_\_\_\_ Fax : \_\_\_\_\_

Name of License Holder:\* \_\_\_\_\_

License Number	Expiration Date
_____	_____
_____	_____

This is to certify that I, \_\_\_\_\_ hereby apply to the City of Shavano Park for registration and will comply with all the Planning, Zoning, Building and other applicable Codes and Ordinances of the City. I acknowledge that non-compliance of these Codes and Ordinances may cause **REVOCATION** of my registration.

Further, I understand that it is MY RESPONSIBILITY to obtain ALL proper PERMITS REQUIRED for jobs performed by me or my representatives. It is my responsibility to inform the "Owner" of the City's Requirements to SECURE PERMITS and call for necessary inspections.

\_\_\_\_\_  
Signature of License Holder

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received By

\_\_\_\_\_  
Date

\* For a contractor holding any type of license, **the license holder MUST** sign the Registration Form.