



# CONTRACTOR REGISTRATION/ RENEWAL

## DEVELOPMENT SERVICES

### APPLICANT INFORMATION

Company/Firm Name:

Applicant Name:

Business Address:

City/State/Zip:

Contact Number (Office):

Contact Number (Mobile):

Contact Email:

### GENERAL INFORMATION

See Unified Development Code Article A section 4 for requirements.

### TYPE OF CONTRACTOR

Please check the appropriate box below:

- |   |  |
|---|--|
| <input type="checkbox"/> Residential General Contractor (Homebuilder) | <input type="checkbox"/> Master Plumber                              |
| <input type="checkbox"/> Combination General Contractor               | <input type="checkbox"/> Master Electrician                          |
| <input type="checkbox"/> Swimming Pool Contractor                     | <input type="checkbox"/> Master Sign Electrician                     |
| <input type="checkbox"/> Sign Contractor                              | <input type="checkbox"/> Air Conditioning & Refrigeration Contractor |
| <input type="checkbox"/> Driveway, Sidewalk, Curb Contractor          | <input type="checkbox"/> Landscape Irrigation Contractor             |
| <input type="checkbox"/> Demolition Contractor                        | <input type="checkbox"/> Fire Protection Sprinkler Contractor        |
| <input type="checkbox"/> Above & Underground Storage Tank Contractor  | <input type="checkbox"/> Fire Alarm Contractor                       |
| <input type="checkbox"/> Residential Third Party Energy               | <input type="checkbox"/> Fire Extinguisher (Suppression) Contractor  |
| <input type="checkbox"/> Commercial Third Party Energy                | <input type="checkbox"/> Underground Fire Main Contractor            |
| <input type="checkbox"/> Utility Contractor                           | <input type="checkbox"/>   |

### ADDITIONAL INFORMATION REQUIRED

- Proof Of Valid State Of Texas License (If Applicable)
- Proof Of Identification (Picture I.D.)
- Registration Fee
- Insurance And\Or Bond

### Certification of Submitted Information

I hereby certify that the information provided is true and correct. Further, I understand that by registering with the City of Longview I acknowledge my responsibilities as outlined within the UDC for each contractor type.

Applicant's Signature

Date