

CONTRACTOR REGISTRATION

Return this completed form along with

1. *Your Texas Master's License (if applicable)*
2. *An approved photo identification*
3. *A Certificate of Liability Insurance that names the City of Hardin as a certificate holder.*
4. *General Contractors ONLY are required to submit a complete W-9 form*

Please note, Certificates of registration provided for in the code expire when the state license or certificate of insurance expires, or after one calendar year, whichever is sooner.

Pursuant to the City Code, application is hereby made for registration as a contractor.

This form may be returned via email to HardinSewerBilling@HardinTexas.com

COMPANY INFORMATION

Name of Business _____

Mailing Address _____

City, State, Zip _____

Email Address _____

Phone _____ Fax _____

Type of License _____

Business State License # _____ Expires _____

Owner/Master Name _____

Owner/Master State License # _____ Expires _____

Owner/Master TDL # _____ Expires _____

Owner/Master Home Address _____

Owner/Master Email Address _____

Owner/Master Home Phone _____

Would you like your company name & contact information posted on our public Registered Contractors list?

- YES, post my info to the public
- NO, I do not want my info posted to the public

FEES

License fee is \$25. No fee for plumbing registration.

For Internal Use Only		
Date Filed	Type of License	License Number
Receipt Number	Date Registration Expires	Issued By

CONTRACTOR REGISTRATION: SUPPLEMENTAL INFORMATION

PLEASE LIST PERSONNEL AUTHORIZED TO SIGN PERMITS ON BEHALF OF THE RESPONSIBLE MASTER.
LIST MASTER FIRST. PLEASE LIMIT ADDITIONAL PERSONNEL.

	Name
Master	
Additional personnel	
Additional personnel	
Additional personnel	

Signature of Responsible Master

Print Name

Date

PLUMBER'S AUTHORIZATION

(TO BE COMPLETED BY MASTER PLUMBERS)

By signing this application for registration, I am certifying that I am in full compliance with the Texas State Board of Plumbing Examiners (TSBPE) Plumbing Licensing Law and Board Rules. I have provided a current certificate of insurance to the TSBPE as required by the law.

I DO DEPOSE AND SAY THE ABOVE INFORMATION IS TRUE AND CORRECT.

Signature of Responsible Master Plumber

Print Name

Date

