

CITY OF LEWISVILLE
IRRIGATOR AND MECHANICAL CONTRACTOR REGISTRATION

REGISTRATION REQUIREMENTS

1. \$60.00
2. A LEGIBLE COPY OF THE MASTER'S STATE LICENSE
3. A LEGIBLE COPY OF THEIR DRIVER'S LICENSE (WITH THE PICTURE CLEARLY VISIBLE)
4. THIS COMPLETED FORM
5. IF MAILING, SEND A SELF ADDRESSED STAMPED ENVELOPE

ONLY CASH OR CHECKS ARE ACCEPTED
INFORMATION AND/OR COPIES MAY NOT BE FAXED

Irrigator <input type="checkbox"/>	Mechanical <input type="checkbox"/>
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Business Name: _____

Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Fax: _____

State License Number: _____ Expiration Date: _____

PLEASE BE AWARE THAT THE MASTER MUST SIGN THIS APPLICATION AND EACH SINGLE TRADE PERMIT APPLICATION.

NO STAMPS, FAXES, OR COPIES OF SIGNATURES WILL BE ACCEPTED.

Signature: _____ Date: _____

City of Lewisville
151 W. Church St.
Lewisville, TX 75057
Phone # 972-219-3470 Fax # 972-219-3772