

# CITY OF LEWISVILLE PLUMBING 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. PROOF OF GENERAL LIABILITY INSURANCE FOR \$300,000.00
5. THIS COMPLETED FORM
6. IF MAILING, SEND A SELF ADDRESSED, STAMPED ENVELOPE

## ONLY CASH OR CHECKS ARE ACCEPTED

Business Name: \_\_\_\_\_

Name of Master: \_\_\_\_\_

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

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

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

State License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

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

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