

City of Cut and Shoot

CONTRACTOR REGISTRATION FORM

TYPE OF CONTRACTOR LICENSE

_____ ELECTRICAL CONTRACTOR

_____ MASTER ELECTRICIAN

_____ JOURNEYMAN ELECTRICIAN

_____ MASTER SIGN ELECTRICIAN

_____ MECHANICAL (HVAC)

_____ IRRIGATOR (LANDSCAPE)

_____ BACKFLOW (*special form required*)

_____ MASTER PLUMBER

_____ JOURNEYMAN PLUMBER

_____ OTHER

CONTRACTOR INFORMATION

COMPANY NAME:

PHONE:

EMAIL ADDRESS:

COMPANY ADDRESS:

CITY, STATE, ZIP:

LICENSEE NAME:

LICENSEE NUMBER:

PHONE:

ADDRESS (MAILING):

CITY, STATE, ZIP:

SIGNATURE:

DATE:

PLEASE PROVIDE COPY OF DRIVER'S LICENSE AND STATE LICENSE

For City use only