

35011 FM 1093  
Simonton, Texas 77476



Phone/Fax:  
(281) 533-9809  
[www.simontontexas.org](http://www.simontontexas.org)  
Please email completed form and documentation  
to: CityHall@SimontonTexas.Gov

## CONTRACTOR REGISTRATION FORM

### TYPE OF CONTRACTOR LICENSE

<input type="checkbox"/> ELECTRICAL CONTRACTOR	<input type="checkbox"/> MECHANICAL (HVAC)
<input type="checkbox"/> MASTER ELECTRICIAN	
<input type="checkbox"/> JOURNEYMAN ELECTRICIAN	<input type="checkbox"/> IRRIGATOR (LANDSCAPE)
<input type="checkbox"/> MASTER SIGN ELECTRICIAN	<input type="checkbox"/> BACKFLOW ( <i>special form required</i> )
<input type="checkbox"/> MASTER PLUMBER	<input type="checkbox"/> OTHER
<input type="checkbox"/> JOURNEYMAN PLUMBER	<input type="checkbox"/> THIRD PARTY ENERGY PROVIDER

### CONTRACTOR INFORMATION

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

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**

CERTIFICATE OF GENERAL LIABILITY SHOWING: CITY OF SIMONTON, P.O. BOX 7, SIMONTON, TX 77476 AS CERTIFICATE HOLDER, MINIMUM INSURANCE MUST BE AT LEAST \$100,000 WITH THE CITY OF SIMONTON AS ADDITIONALLY INSURED.