

Mailing Address
704 Church Street
East Bernard, Tx 77435

Phone: 979-335-6558
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Fax: 979-335-6532



CONTRACTOR REGISTRATION FORM

Type of Contractor: (Circle One)

General Electrical Plumbing Mechanical Homeowner Sign Demolition
Roofing Irrigation Fire System Swimming Pool Other: _____

Provide copies of the Following:

Driver's License Contractor's License
State License Copy of Certificate of Insurance

Please Type or Print:

Company Name: _____ Phone: _____ Fax: _____

Company Mailing Address: _____ City, State, Zip: _____

Email Address: _____

Licensed Individual:

Licensee Name: _____ Phone: _____

Home Address: _____ City, State, Zip: _____

Mailing Address (if different from above): _____

State License #: _____ Expiration Date: _____

Contractor/Authorized Agent/Owner

Date