



**City of San Angelo
Permits and Inspections Division
52 W. College Ave.
San Angelo, Texas 76903
(325) 657-4210 / Fax No. (325) 657-4435**

**CONTRACTOR REGISTRATION FORM
MAINTENANCE CONTRACTORS**

Registration No. _____

CHECK ALL THAT APPLY: PLUMBING ELECTRICAL MECHANICAL
OTHER: _____

Business Name: _____

Mailing Address: _____

Maintenance Person's Name: _____

Maintenance Person's Home Address: _____

email address: _____

Telephone Numbers:

Business: _____ **Home:** _____ **Mobile:** _____ **Fax:** _____

(Circle the phone number where you can be reached during normal business hours.)

Generally describe the type of work you will be doing: _____

FEES

New Contractor Registration Fee: \$ 10.00 (paid by cash or check)

***Note: contractor registration is from January to December of each year.**

Contractor Yearly Renewal Fee: \$ 5.00 (an invoice will be sent each December)

Do you want a laminated wallet sized I.D. card for an additional fee of \$1.00? Yes No

IMPORTANT INFORMATION

√ **I understand it is MY responsibility to know and comply with all Laws, Rules, and Regulations.**

√ **I understand the City of San Angelo has adopted the 2009 International Codes, 2008 Electrical Code, and I agree to comply with the provisions of those codes.**

√ **I understand I MUST report any changes in my company name, permanent address, business address, business affiliation, or telephone numbers within 30 days.**

√ **I, the undersigned, have received a copy of the San Angelo City Ordinances related to my field.**

Signature of License Holder

Date