

City Of Quitman

Permits & Inspections

CONTRACTOR REGISTRATION FORM

401 E. GOODE. ST QUITMAN, TX. 75783 PHONE: (903)763-2223 FAX: (903)763-5631

PHONE: (903)/63-2223				FAX: (903)/63-5631			
***Registration	ls On	ly Good For 1 Cal	endar	Year. Must Re-N	lew Ai	nnually	***
Type of Contracto	or Ple	ease Check One:					
General		Plumbing		Electrical		Sign	
Mechanical		Irrigation		Roof		Other	
Please Provide th	e foll	owing:					
1. Valid Texas Drivers License							
2. Contractor Lice	nse						
3. Certificate of Li	iabilit	y Insurance					
Contractor Inform	natio	n:					
Name:				TDL #:			
State License #:				Exp:			
Home Address:				Zip:			
City:		State:		Phone:			
Email:							
Business Informa	tion:						
Co. Name:				O. Phone:			
Owner Name:				C. Phone:			
Mailing Address:				Zip:			
City:		State:		Your Position:			
		OYED WITH YOUR CO YOUR REGISTRATION,				SE PERMI	TS
1				TDL #:			
2				TDL #:			
2 3 4			TDL #:				
4				TDL #:			
Applicant Signature				Date			
City Of Quitman Representative				Date			

All contractors are required to maintain at least minimum General Liability insurance coverage at all times to satisfy proof of financial responsibility.