

City of San Angelo, Texas - Building Permits & Inspections 52 West College Avenue



CONTRACTOR REGISTRATION FORM: ELECTRICAL

Additional Authorized Contacts (if applicable) exas Contractor's # State License # License Holders Name	Business Name	Mailing Address	City	State	Zip Code	192
Mail Address Ware's Name	admice value	Walling / Address	Olly	otate	Zip Code	
Additional Authorized Contacts (if applicable) exas Contractor's # State License # License Holders Name Years as a Master Electric surance Company Policy Number Expiration Date Agent rovide one contact number to be reached at during normal husiness hours Business Home: Fax:	hysical Address		City	State	Zip Code	
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Section 2: Contractor Acknowledgement If this form is not submitted in person by the license holder, a notarized copy of this application must be submitted in person by the license holder, a notarized copy of this application must be submitted in person by the license holder, a notarized copy of this application must be submitted in form is not submitted in person and the latest adopted Lib. (with ID number and date of birth redacted). It is my responsibility to know and compty with all laws, rules and requisitions. I agree to compty with all provisions in the latest adopted City Code of Ordinances. I the undersigned. have received a copy of the San Angelo City Ordinances related to my field. I must report any changes in my company name permanent address, business address, business affiliation, or telephone numbers within 30 de and in must have my company paname and state license number on both sides of my vehicle in two inch letters as specified in the City of major lock of ordinances. I understand It is my responsibility to maintain required insurance, ensure the insurance company provides this office with an original certificate insurance, not asked copy, each year upon renewal which lists the City of San Angelo as the certificate holder, and no permits will be issued if I fail to 0. I have submitted a government issued photo LD. (with ID number and date of birth redacted) I have submitted a government issued photo LD. (with ID number and date of birth redacted) The vertified Complete Description of Master Electrician Date Laminated wallet size LD. card for \$1.00 Description in the latest and the certified incomplete Description in the latest and the certified incomplete Description in the latest and the latest and the latest and the latest and late	nsurance Company Provide one contact numb	•		•		Agent
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Date:	I have submitted a gov	vernment issued photo I.D.				
Hours of Operation: 8 AM -12 PM & 1PM - 5 PM No payments or permit issuance can be made after 4 PM due to accounting constraints. 325-657-4210, #1 www.cosatx.us/permits e State of Texas unty of fore me, a Notary Public, on this day personally appeared, known to me (or proved to me on the couted the same for the purpose and consideration therein expressed. Given under my hand and seal of office this day of A.D. 20 Notary Public, State of Texas	I have submitted a gov	vernment issued photo I.D.	(with ID numbe	er and date of birth redacted)		
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