2019 GENERAL CONTRACTOR RENEWAL REGISTRATION FORM

Building Inspections

Mailing Address: 2121 Cross Timbers Road
Flower Mound, TX 75028
(972) 874-6355

Registration fee: $125.00
*****Sign Contractor Registration fee: $75.00**
Registration is valid for the 2019 calendar year.

ONLY 2018 REGISTERED GENERAL CONTRACTORS RENEWING THEIR CONTRACTOR REGISTRATION SHOULD USE THIS FORM.

Please check all that apply, AND circle your main scope of business.

Contractor Type: ☐ **Commercial** ☐ **Residential** (New Homes/Remodel) ☐ **Roof** ☐ **Fence** ☐ **Pool** ☐ *****Sign** ☐ **Other:**_____ (Description Required)

Business Name: _____

Owner/Officer of the Company*:_____ **Title:** _____

***(Officer of the company – e.g., President, Vice President, CEO.) This person will be held responsible for seeing that all work being performed under this registration is completed and in compliance with Town codes and ordinances**. PLEASE ATTACH A CURRENT LEGIBLE (TEXT AND PICTURE) COPY OF THIS PERSON'S DRIVER'S LICENSE, OR IF THE OWNER OR OFFICER DOES NOT POSSESS SUCH A VALID DRIVER'S LICENSE, THEN SUCH OTHER IDENTITY CARD OR DOCUMENT ISSUED BY THE FEDERAL OR STATE GOVERNMENT CONTAINING THE PICTURE AND SIGNATURE OF SAID PERSON.

Physical Mailing Address: _____

City:_____ **State:**_____ **Zip:** _____

E-Mail Address: _____

Initial here to allow your email address to be included in contractor lists given to the public: _____

Business Phone: (____)_____ **Fax: (_____)**____

Cell Phone: (____)_____

Personnel authorized to obtain a permit under this business name (use company letterhead for additional names)**:**

Name: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____

_____ _____
ORIGINAL Signature of Owner or Officer **Printed Name of Owner or Officer**

IF REGISTERING BY EMAIL, THIS FORM ALONG WITH A COPY OF THE LICENSE OF THE OWNER OR OFFICER MUST BE EMAILED TO BIPERMITSUBMITTAL@FLOWER- MOUND.COM.

IF REGISTERING BY MAIL, YOU MUST INCLUDE A SELF-ADDRESSED STAMPED ENVELOPE TO RECEIVE A RECEIPT OF PAYMENT. YOUR CONTRACTOR PASSWORD FOR eTRAKiT CANNOT BE GIVEN VIA TELEPHONE AND WILL ONLY BE GIVEN OUT AT OUR OFFICE TO THE PARTIES LISTED ON THIS REGISTRATION FORM WITH PROPER IDENTIFICATION OR SENT VIA EMAIL TO THE EMAIL ADDRESS LISTED ON THIS REGISTRATION FORM. REGISTRATION IS VALID FOR THE CALENDAR YEAR YOU ARE REGISTERING IN UNLESS YOU ARE REGISTERING IN DECEMBER, IN WHICH CASE, YOUR REGISTRATION WILL CARRY OVER TO THE FOLLOWING CALENDAR YEAR.

FOR OFFICE USE ONLY

REVIEWED BY_____ **FEE AMOUNT PAID $** _____ **DATE RECEIVED** _____

(Revised 11/29/2018)