

DEVELOPMENT CONTRACTOR REGISTRATION FORM



2121 Cross Timbers Road
Flower Mound, TX 75028
(972) 874-6315

Engineering@flower-mound.com

Registration fee: \$125.00
Registration is valid one year from date of registration.

[ ] New Contractor Registration

[ ] Existing Contract – Renewal

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

Contractor Type : [ ] General [ ] Utility [ ] Paving [ ] Material Testing/ Geotechnical [ ] Right-of-way

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

\*\*EMAIL THIS FORM ALONG WITH A COPY OF THE LICENSE OF THE OWNER OR OFFICER TO:

ENGINEERING@FLOWER-MOUND.COM

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 \_\_\_\_\_