



CONTRACTOR REGISTRATION INFORMATION

CITY OF TOMBALL
501 James Street
Tomball, Texas 77375
(281) 290-1402 (281) 351-4735 Fax
www.ci.tomball.tx.us

Date: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY: _____ STATE / ZIP: _____

CONTACT NAME: _____

OFFICE PHONE: _____ OFFICE FAX: _____

CONTACT CELL PHONE: _____ E-MAIL: _____

STATE LICENSE #: _____

STATE LICENSE #: _____ MASTER LICENSE #: _____

The person holding the State License must sign all Permit Applications. If anyone other than the person holding the State License will be applying, paying and signing for the Permit, please list their names below.

AUTHORIZED PERSONNEL (PRINT NAMES)

_____	_____
_____	_____
_____	_____
_____	_____

PLEASE NOTE:

****Contractor must provide Liability Insurance with a minimum of \$500,000 of combined single limit coverage Equal to or Greater than the contract amount, whichever is greater. The City of Tomball must be listed as the "Certificate Holder" on the policy.**

Submitted By (Print): _____ Date: _____

Submitted By (Signature): _____ Date: _____

