



City of Bedford
 Development Department
 Building Inspections

1805 L Don Dodson
 Dr. Bedford, TX
 76021 Phone:
 817-952-2140 Fax:
 building.permits@bedfordtx.gov

Registration begins January 01 and ends December 31

| | | |
|---------------|--|-----------------------|
| Fee: \$100.00 | CONTRACTOR REGISTRATION APPLICATION | Registration Year: 20 |
|---------------|--|-----------------------|

| | | |
|--|--------------------|--------------------|
| Company Name | | |
| Owner/Officer of the Company | | Title |
| <p>(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 City 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.</p> | | |
| Mailing Address | | Suite |
| City | State | Zip |
| Physical Address (if different) | | Suite |
| City | State | Zip |
| Email Address | | |
| Business Phone | Alternate Phone #1 | Alternate Phone #2 |

| CONTRACTOR TYPE | | |
|-----------------|--|--|
| GENERAL | <i>Commercial, Residential, etc...</i> | |
| MECHANICAL | <i>Texas State License Required</i> | |
| ELECTRICAL | <i>Texas State License Required</i> | <i>Registration fees exempt per Section 1305.201 (f) Texas Occupations Code</i> |
| PLUMBING | <i>Texas State License Required</i> | <i>Registration fees exempt per Section 1301.551 (g) Texas Occupations Code.</i> |
| IRRIGATION | <i>Texas State License Required</i> | |
| SIGN | | |
| PUBLIC WORKS | <i>\$2500 Bond Required</i> | |

| | | |
|-------------------|-----------------------|-----------------------|
| Drivers License # | Texas State License # | Texas State License # |
|-------------------|-----------------------|-----------------------|

| PLEASE LIST THOSE WHO WILL HAVE AUTHORITY TO OBTAIN PERMITS IN YOUR COMPANY NAME | | |
|--|--|--|
| | | |
| | | |

| | |
|------------|---------------|
| Print Name | Contact Phone |
| Signature | Date |