

35011 FM 1093  
Simonton, Texas 77476



Phone  
(281) 533-9809  
[www.simontontexas.gov](http://www.simontontexas.gov)  
Email to:  
[NMohr@simontontexas.gov](mailto:NMohr@simontontexas.gov)

## CONTRACTOR REGISTRATION FORM

---

### TYPE OF CONTRACTOR LICENSE

- |  |  |
|--|--|
| <input type="checkbox"/> ELECTRICAL CONTRACTOR   | <input type="checkbox"/> MECHANICAL (HVAC)           |
| <input type="checkbox"/> MASTER ELECTRICIAN      | <input type="checkbox"/> IRRIGATOR (LANDSCAPE)       |
| <input type="checkbox"/> JOURNEYMAN ELECTRICIAN  | <input type="checkbox"/> BACKFLOW                    |
| <input type="checkbox"/> MASTER SIGN ELECTRICIAN | <input type="checkbox"/> OTHER                       |
| <input type="checkbox"/> MASTER PLUMBER          | <input type="checkbox"/> THIRD-PARTY ENERGY PROVIDER |
| <input type="checkbox"/> JOURNEYMAN PLUMBER      |  |

### CONTRACTOR INFORMATION

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

LICENSEE NAME: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS (MAILING): \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

### PLEASE PROVIDE COPY OF DRIVER'S LICENSE AND STATE LICENSE

CERTIFICATE OF GENERAL LIABILITY **REQUIRED** SHOWING: CITY OF SIMONTON, P.O. BOX 7, SIMONTON, TX 77476 AS CERTIFICATE HOLDER. MINIMUM INSURANCE MUST BE AT LEAST \$1,000,000 WITH THE CITY OF SIMONTON AS ADDITIONALLY INSURED.