



# CONTRACTOR REGISTRATION

Department of  
Community Development

Incomplete applications will not be accepted.  
Indicate "NA" when an item does not pertain to your application.

## \*Depicts Required Fields

All contractors must be registered with the City of Willis prior to obtaining permits. This application must be accompanied with a copy or all related State licenses, a copy of the licensee's driver's license, and a certificate of General Liability insurance naming the City of Willis as the certificate holder.

COMPANY NAME AND INFORMATION			
*Company Name:			
Owner Name:			
Mailing Address:			Suite #:
City:	State:	Zip code:	
*E-mail address:			
*Business Phone:			
Master License Holder of Company			
*Name:			
Address:			
City:			
State:	Zip:		
*Phone:	Alt:		
*E-mail:			
Trade License # Type and Expiration			
1.			
2.			
3.			
4.			
	General	\$50.00	
	Mechanical	Exempt	
	Irrigation	\$50.00	
	Sign	\$50.00	
	Swimming Pool	\$50.00	
			Electrical
			Exempt
			Fire Sprinkler/Alarm
			Exempt
			Plumbing
			Exempt
			Backflow Tester
			\$30.00
			Other:
<b>Please list those who have the authority to apply for and pick up permits in your company name:</b>			
Name:	DL:	Phone #:	
Name:	DL:	Phone #:	
Name:	DL:	Phone #:	
Name:	DL:	Phone #:	

**CERTIFICATION:** THE UNDERSIGNED HEREBY CERTIFIES THAT ON THIS DATE REGISTRATION WAS MADE FOR THEIR COMPANY WITH THE CITY OF WILLIS AND THAT THE INFORMATION PROVIDED ON THIS REGISTRATION FORM AND ANY SUPPORTING DOCUMENTATION SUBMITTED IS TRUE AND CORRECT BY THIS SIGNATURE; THE APPLICANT HAS READ ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND AGREES TO COMPLY WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL CODES AND CITY ORDINANCES.

\_\_\_\_\_  
Registrant Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date