



City of Hidalgo Contractor's Registration Form

COMPANY NAME: _____

NAME OF CONTRACTOR: _____

REGISTER FOR: _____

BUSINESS ADDRESS: _____ CITY _____ STATE _____ ZIP _____

HOME ADDRESS: _____ CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBERS WORK: _____ HOME: _____

RESPONSIBLE PERSON: _____ TITLE: _____

CONTRACTOR'S STATE LICENSE NUMBER: (Electrician, Plumber & Mechanical)

(Please attach copy of license)

Other Licenses: _____

I hereby state that the above information is true and correct. I understand that this registration is a matter of public record and the information contained herein will be available to the public. I understand and agree that failure to provide requested information or providing false information in this registration form can result in denial, suspension or cancellation of registration. I further understand and agree that revocation, suspension or denial of my State or other applicable license will result in the automatic denial, suspension or revocation of this registration.

SIGNATURE: _____

PRINT NAME: _____

DATE: _____

OFFICE USE ONLY

_____ NEW (\$100.00)

_____ RENEWALS (\$50.00)

APPROVED BY: _____ DATE: _____

- Elec. a/c# 01-00-50-4116
- Plumb. a/c# 01-00-50-4117
- Mech. a/c# 01-00-50-4118

