

## **CONTRACTOR REGISTRATION**

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### Return this <u>completed</u> form along with the following as .pdf files:

- 1. Your Texas Master's License (if applicable)
- 2. An approved photo identification
- 3. A Certificate of Liability Insurance that names the City of Bee Cave as certificate holder.
- 4. A completed W-9 form.

All forms must be submitted before a contractor will be registered or added to a project.

\*Please note, Certificates of registration provided for in the code expire when the state license or certificate of insurance expires, or after one calendar year, whichever is sooner. \*
Pursuant to the City Code, application is hereby made for registration as a contractor.

This form may be returned via email to that field beecavetexas.gov.

	COMPANY INFORMATION
Name of Business	
Mailing Address	
City, State, Zip	
Email Address	
Phone	Fax
Project Number	
Project Address	
Type of License	
State License Number	Expires
Owner/Master Name	
Owner/Master TDL Number	Expires
Owner/Master Home Address	
Owner/Master Email Address	
Owner/Master Home Phone	



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☐ Architect		☐ General Contractor	☐ Propane Installer
□ Concrete	Contractor	☐ Irrigation Installer	□ Roofer
□ Electricia	n	☐ Mechanical/HVAC	☐ Solar Contractor
☐ Excavation	n	□ OSSF	☐ Tree Trimming
☐ Fence Co	ntractor	□ Plumber	☐ Utilities Contractor
☐ Fire Alarr	n	☐ Pool Contractor	□ Other
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### **PLUMBERS AUTHORIZATION**

(TO BE COMPLETED BY MASTER PLUMBERS)

By signing this application for registration, I am certifying that I am in full compliance with the Texas State Board of Plumbing Examiners (TSBPE) Plumbing Licensing Law and Board Rules. I have provided a current certificate of insurance to the TSBPE as required by law.

I DO DEPOSE AND SAY THE ABOVE INFORMATION IS TRUE AND CORRECT. Signature of Responsible Master Plumber

Print Name

Date