



CONTRACTOR REGISTRATION APPLICATION

Application: New Renewal

Date: _____

Please Select:

- General Contractor Electrical Contractor Mechanical Contractor Electrical Sign Contractor
 Plumbing Contractor Irrigator Fire Systems Sign Contractor
 ENG General Contractor (Pavement Cuts)

Electrical / Sign Contractor License Information: (If Applicable)

Master License # _____

State License # _____

Master Information for all other trades: (If Applicable)

Name: _____ State License# _____
(Exactly as it appears on the Master's License issued by the State of Texas)

Business Information

Sole Proprietor Partnership Corporation LLC Other _____

Submit copy of the DBA Certificate, Articles of Incorporation and Bylaws to verify signing authority

Business Name: _____

Principal / Owner of Company: _____ Date of Birth _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Number: _____

Number of years the company has been in existence: _____

Please note that on April 22, 2008, the U.S. Environmental Protection Agency (EPA) published a final regulation, the Lead-Based Paint Renovation, Repair and Painting (RRP) Rule, aimed at protecting the public from lead-based paint hazards associated with renovation, repair, and painting activities. The rule requires that firms performing renovation, repair, and painting projects that disturb lead-based paint in homes, child care facilities and pre-schools built before 1978 have their firm certified by EPA, use certified renovators who are trained by EPA-approved training providers and follow lead-safe work practices. If you would like additional information regarding the RRP rule please ask a clerk for an information pamphlet which contains contact information for the EPA.



Date: _____

Contractor Authorization Slip

Business Name: _____

Business Address: _____

Business Phone Number: _____ Business Fax Number: _____

Email Address: _____

(If password is lost it will be emailed to this address)

The following representatives are authorized, after verification of password, to request and deliver permits, plans specifications, request inspections and any other documents pertaining to my company except for adding or removing authorized personnel:

I would like to delete the following names from my authorized list of personnel:

Print Principal /Owner Name: _____

Principal / Owner Signature: _____

PASSWORD: _____
(Minimum of 6 alphanumeric characters, No Special Characters,
Not Case Sensitive and No Spaces In Our Build El Paso App.)