



City of Dickinson Community Development

Contractor Registration Application

** Each contractor can be licensed for multiple Contactor Types on one application. **
** One application can be submitted for each Business and/or Company **

Details of Request

Application Type: New Renewal

Business Information

Company Name: _____

Business Owner: _____
Last *First* *M.I.*

Address: _____
Street Address *Unit #*

City *State* *ZIP Code*

Phone: _____ Email: _____

Contractor Information

Contractor Type: Backflow Electrical General Irrigation
(select all that apply) Mechanical Plumbing Sign

Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Unit #*

City *State* *ZIP Code*

Phone: _____ Email: _____

Insurance Information

Insurance Company: _____

Agent Name: _____

Phone: _____ Email: _____

Policy Number: _____

Effective Date: _____ Expiration Date: _____

**** The City of Dickinson must be listed as the certificate holder. ****

Bond Information

Bond Company: _____

Agent Name: _____

Phone: _____ Email: _____

Bond Number: _____

Effective Date: _____ Expiration Date: _____

**** The City of Dickinson must be listed as the certificate holder. ****

Additional Contact Information

**** City will not provide information, permits, or inspections to anyone not listed on the Contractor Registration application. ****

Contractor Type: Backflow Electrical General Irrigation
(select all that apply) Mechanical Plumbing Sign

Contact Type: _____

Contact: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. By my signature, I hereby affirm that I am the **property owner** of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is **complete and accurate**, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's Fee Schedule. This (FEE) is **non-refundable** even in the event of application withdrawal. I have the power to authorize and hereby grant permission for **City of Dickinson Officials** to enter the property on official business as part of the application process.*

Signature: _____ Date: _____

Printed Name: _____

Staff Use Only

Date Application Received: _____ Entity Number: _____

Application Fee: _____ Date Paid: _____

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(select all that apply) Mechanical Plumbing Sign

Contact Type: _____

Contact: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

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Contact Type: _____

Contact: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Contractor Registration Requirements Checklist

The following list of submittal requirements shall be used by the applicant as a checklist in preparing a complete application. Applications that do not have these items will be rejected and returned to the applicant.

- Application – complete with signature.
- Fees – The following fees have been adopted by City Council and are periodically changed. All fees are non-refundable. Before submitting payment, please contact Community Development to confirm appropriate payment amount.
 - Electrical, Mechanical, or Plumbing Contractors
 - \$0.00
 - Backflow, General, Irrigation, or Sign Contractors
 - \$100.00 New
 - \$50.00 Renewal
- Copy of the Contractor of the state master license (if applicable).
- Copy of Certificate of Insurance (COI) with the City of Dickinson, 4403 Hwy 3 Dickinson, TX 77539, listed as the certificate holder