

Contractor Registration Sheet
City of Mineral Wells Inspection Department
Email to inspections@mineralwellstx.gov

A copy of your General Liability Insurance Certificate, Driver's License, and Installer/Master Trade License are required to complete your registration.

Contractor's Name _____

Company's Name _____

Company Address _____

City, State, Zip _____

Business Phone _____ Cell Phone _____

Fax Number _____

Email _____

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Contractor Type:

☐ General Contractor ☐ Roofing Contractor ☐ Manufactured Home Installer

☐ Mechanical Contractor ☐ Electrical Contractor ☐ Plumbing Contractor

☐ Irrigation Contractor ☐ Sign Contractor ☐ Electrical Sign Contractor

☐ Other: _____

Installer/Trade License # _____

General & Roofing Contractors do not have a Master License, but all other Contractors will need to list their Installer License # or Master Trade License # above.

I hereby agree to abide by all requirements of the City of Mineral Wells Code of Ordinances and all other applicable regulations. I understand that I must have all of my work inspected by the City of Mineral Wells in a timely manner.

Signature

Date