

**CITY OF MOUNT PLEASANT, TEXAS
BUILDING PERMITS AND INSPECTIONS
CONTRACTOR REGISTRATION FORM – ALL TRADES**

Applicant Full Name: _____

Business Name: _____

Mailing Address: _____ State: _____ Zip: _____

Physical Address: _____ State: _____ Zip: _____

Office Ph #: _____ Cell ph#: _____ Fax: _____

Email Address: _____

SELECT CONTRACTOR TYPE

Residential Builder _____

Commercial Builder _____

Sign Contractor _____

Pool / Spa Contractor _____

Electrical Master _____ State license# _____ Expires _____

Mechanical Master _____ State license# _____ Expires _____

Plumbing Master _____ State license# _____ Expires _____

Irrigation _____ State license# _____ Expires _____

REQUIRED ITEMS

A completed copy of this application

A copy of your State Trades License (if applicable)

A copy of your State Driver's License

A copy of your General Liability Insurance

READ AND SIGN BELOW

I hereby certify by my signature below that: 1) I possess and will maintain all required licenses certifying that I am properly credentialed to do the work I will do, 2) I understand that I am the person solely responsible for inspections and all related fees and charges, 3) I agree to abide by all laws and ordinances governing this type of work whether specified herein or not, and 4) I have read and examined this application and know the same to be true and correct.

Signature: _____ Date: _____

MAIL OR DELIVER TO

Building & Development
501 N Madison (**mailing address**)
500 N Madison (**physical address**)
Mount Pleasant, TX 75455

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Fax# 903 577-1828
Email: rreynolds@mpcity.org