

CONTRACTOR REGISTRATION

Date: _____
Company Name: _____
Contact Person: _____
Address: _____
Email Address: _____

Contractor Information

Name: _____
Mailing Address: _____
Email Address: _____
Contractor License Number: _____ Phone: _____
Signature: _____ Date: _____

Application Must Include the Following:

(Applications not containing all information will be rejected)

☐ Drivers License ☐ State License ☐ Liability Insurance

Exp: _____ Exp: _____ Holder City of Covington

*Not required for GC

Signature

Please Email all applications to: city.secretary@covingtontx.net

For Drop-off, please bring to: 107 N. Douglass, Covington, Tx 76636

For City of Covington Office Use Only

Reviewed Date: _____ City Staff: _____

Fees Paid: ☐ Yes ☐ No ☐ No Cost Expiration: _____

Contractor:

(Please mark the box that applies to you)

- ☐ Electric: \$0
 ☐ Master
 ☐ Journeyman
☐ Plumber: \$0
 ☐ Master
 ☐ Journeyman
☐ Mech. (HVAC) \$0
☐ Irrigation \$50
☐ Back-flow \$50
(Special Form Required)
☐ General Contractor \$100
☐ Other

Franchisee
Contractor \$0
*Must provide insurance.

- ☐ Pathways
☐ Oncor
☐ Atmos
☐ Other

Please note that Contractor Registration Forms are valid for 12 months and will need to be renewed each year.