



MECHANICAL CONTRACTOR REGISTRATION

CITY OF ANGLETON

121 S. Velasco

PHONE 979-849-4364 OPTION 2 TWICE

Permits@angleton.tx.us

COPY OF VALID DRIVER'S LICENSE AND CURRENT INSURANCE NAMING THE CITY OF ANGLETON AS CERTIFICATE HOLDER (MINIMUM \$300,000.00 LIABILITY) MUST ACCOMPANY APPLICATION.

BEFORE A PERMIT MAY BE ISSUED UNDER THIS ARTICLE, THE PERMIT APPLICANT SHALL DELIVER TO A MECHANICAL INSPECTOR SATISFACTORY EVIDENCE OF A VALID MECHANICAL LICENSE ISSUED BY THE STATE OF TEXAS.

(ORD. NO. 2062, § 1(13a.1-14), 5-20-86; ORD NO. 2157, § 2, 9-20-88)

COMPANY NAME: _____ BUSINESS OWNER: _____

STREET ADDRESS: _____ CITY/STATE/ ZIP: _____

PHONE: (____) ____ - _____ EMAIL: _____

PERSONS AUTHORIZED TO SIGN FOR PERMITS

DL NUMBER / EXPIRATION

1. _____

2. _____

3. _____

4. _____

APPLICANT SIGNATURE

DATE

(PRINTED NAME)

Subscribed and sworn to before me on this _____ day of _____
20____.

Notary Public