



City of Beasley
319 South 3rd Street
P.O. Box 122
Beasley, TX 77417

Phone: (979) 387-2775
Fax: (979) 387-2423
Email: beasley@cityofbeasley.com

Contractor Registration Form

TYPE OF CONTRACTOR LICENSE

<u> ELECTRICAL CONTRACTOR </u>	<u> MECHANICAL (HVAC) </u>
<u> MASTER ELECTRICIAN </u>	
<u> JOURNEYMAN ELECTRICIAN </u>	<u> IRRIGATOR (LANDSCAPE) </u>
<u> MASTER ELECTRICIAN </u>	<u> BACKFLOW (special form required) </u>
<u> MASTER PLUMBER </u>	
<u> JOURNEYMAN PLUMBER </u>	

CONTRACTOR INFORMATION

COMPANY NAME: _____ PHONE: _____

COMPANY ADDRESS: _____

CITY, STATE, ZIP: _____

LICENSEE NAME: _____

LICENSEE NUMBER: _____ PHONE: _____

ADDRESS (MAILING): _____

CITY, STATE, ZIP: _____

SIGNATURE: _____ DATE: _____

****PLEASE PROVIDE A COPY OF DRIVER'S LICENSE, STATE LICENSE, AND CERTIFICATE OF LIABILITY INSURANCE****