

Contractors Registration Form

New Registration			Change/Update	
Address of Project:				
CONTACT INFO				
Company Name	Contact First Name		Contact Last Name	
Business Mailing Address	City		State	Zip
Office Phone Number	Cell Number		Email	
TYPE OF LICENSE				
Electrical Mechanical	al Plumbing General Contractor Other			
License Holder First Name: Last Name:				
License #:	Expiration Date:			
License Holder Signature	Printed Name		Date	
REQUIRED DOCUMENTS				
Please include a valid Certificate of Liability Insurance listing the City of Jonestown as Certificate Holder				
City of Jonestown				
18649 FM 1431, Suite 1A				
Jonestown, TX 78645 Email: permitting@jonestowntx.gov				
512-267-0359				