



701 N. Tool Dr Tool, TX 75143

Office: 903.432.3522

Fax: 903.432.9385

www.tooltexas.org

Contractor Registration

Date _____

Company Name _____ Owner Name _____

Company Mailing Address _____

Company Physical Address _____

Contact Numbers _____ Cell _____ Home _____ Fax _____

Name of License Holder _____ Company Email _____

Contractor Signature

Approved By Signature

Required Documents

- Completed Contractor Registration Form
- Copy of State Trade License (TRCC)
- Copy of Drivers License / Government I.D.
- Copy of Company Liability Insurance

Contractor Registration Fee - \$75.00

Annual Contractor Renewal Fee - \$25.00

Office Use

License / Registration Type

- Electric
- General Contractor
- Plumbing
- Other _____
- HVAC

Amount Paid \$ _____ Date Paid _____ Expiration Date _____
