



701 N. Tool Dr.
Tool, TX 75143

Office: 903.432.3522
Fax: 903.432.3867

www.tooltexas.org
LBaker@tooltexas.org

Contractor Registration

Date _____

Company Name _____ Owner Name _____

Company Mailing Address _____

Company Physical Address _____

Contact Numbers (Cell) _____ (Home/Office) _____ (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 (REGISTRATION IS VALID FROM JAN 1 TO DEC 31)

**No fee for Plumbing registration*

Early Renewal (Dec 1 – Dec 31): \$25.00

Office Use

License / Registration Type

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

Amount Paid \$ _____ Date Paid _____ Expiration Date _____
