



Town of Pantego  
1614 S. Bowen Rd., Pantego, TX 76013  
(817) 617-3700 or (817) 617-3726 Fax  
[info@townofpantego.com](mailto:info@townofpantego.com)

## CONTRACTOR REGISTRATION

### COMPANY INFORMATION

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL or WEBSITE: \_\_\_\_\_

### OWNER'S INFORMATION

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### LICENSE INFORMATION

NAME OF LICENSE HOLDER: \_\_\_\_\_

TYPE OF LICENSE: \_\_\_\_\_ STATE LICENSE #: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE OF LICENSE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

### REQUIRED REGISTRATION SUBMITTALS

- |  |  |
|--|--|
| <input type="checkbox"/> COPY OF STATE LICENSE (IF APPLICABLE) | <input type="checkbox"/> NOT REQUIRED            |
| <input type="checkbox"/> COPY OF DRIVER'S LICENSE              | <input type="checkbox"/> COPY OF INSURANCE (COI) |
| <input type="checkbox"/> REGISTRATION FEE                      |  |

INITIAL REGISTRATION: \$100  
RENEWAL FOR 1 YEAR: \$ 75  
RENEWAL FOR 2 YEARS: \$125

**RENEWAL TIME FRAME: 30 DAYS PRIOR / 60 DAYS AFTER EXPIRATION**

**\*FOR TOWN USE ONLY\***

RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTRACTOR REGISTRATION NUMBER: \_\_\_\_\_ FEE: \_\_\_\_\_