



City of Haslet

Building Department

Contractor Registration Application

Application Date: _____

Contractor Type:

- Electrical
 Plumbing
 HVAC / Mechanical
 Irrigator
 General

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone #: _____ email: _____

Name of Licensee: _____

- Master's
 Journeyman's

License #: _____ Expiration Date: _____

*Proof of Insurance and Picture Identification
must be submitted with application.*

-----Office Use Only -----

\$50.00 Annual fee paid - New Applicant

\$25.00 Annual fee paid – Renewal

Electrical or Plumbing -No Charge

Mechanical- No Charge

_____ Copy of License

_____ Copy of Insurance

_____ Copy of Picture Identification

Haslet Annual Registration
Expires: _____