



Additional Contractor Form

USE THIS FORM ONLY IF ADDITIONAL CONTRACTORS ARE ASSOCIATED WITH YOUR PERMIT AND THE PRIMARY APPLICATION DOES NOT PROVIDE SPACE TO INCLUDE THEM

Section 1. Site Information. This Section Must Be Completed

Permit Address (& suite #, if applicable):	Subdivision:	Lot #:	Block:
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Section 2. Associate Additional Contractors

Contractor Type #1		Contractor Info	
Backflow	Electrician	Business Name:	
Fire Sprinkler	General	Contractor Name:	
Home Builder	Irrigation	Address:	
Mechanical	Plumber	City/State/Zip:	
Property Owner	Swimming Pool	Phone:	Email:
Other:		State Lic. #:	Insurance #:
Contractor Type #2		Contractor Info	
Backflow	Electrician	Business Name:	
Fire Sprinkler	General	Contractor Name:	
Home Builder	Irrigation	Address:	
Mechanical	Plumber	City/State/Zip:	
Property Owner	Swimming Pool	Phone:	Email:
Other:		State Lic. #:	Insurance #:
Contractor Type #3		Contractor Info	
Backflow	Electrician	Business Name:	
Fire Sprinkler	General	Contractor Name:	
Home Builder	Irrigation	Address:	
Mechanical	Plumber	City/State/Zip:	
Property Owner	Swimming Pool	Phone:	Email:
Other:		State Lic. #:	Insurance #:
Contractor Type #4		Contractor Info	
Backflow	Electrician	Business Name:	
Fire Sprinkler	General	Contractor Name:	
Home Builder	Irrigation	Address:	
Mechanical	Plumber	City/State/Zip:	
Property Owner	Swimming Pool	Phone:	Email:
Other:		State Lic. #:	Insurance #:

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