City of Duncan
COMMUNITY DEVELOPMENT

CONTRACTOR REGISTRATION
All Trades

X Applicant Please Complete Items 1 - 8

Contractor No. _____

FULL NAME

1.

BUSINESS NAME

2.

MAILING ADDRESS

3. Address _____

City _____

State _____ Zip _____

PHYSICAL ADDRESS

4. Address _____

City _____

State _____ Zip _____

CONTACT INFORMATION

5. Phone _____

Mobile _____

Fax _____

Email _____

6. SELECT CONTRACTOR TYPES

☐ Residential Builder

☐ Commercial Builder

☐ Sign Contractor

☐ Pool / Spa Contractor

☐ Electrical Contractor **No.** _____ **Exp.** _____

☐ Mechanical Cont. **No.** _____ **Exp.** _____ ☐ A ☐ B

☐ Plumbing Contractor **No.** _____ **Exp.** _____

No. = State License Number **Exp. = Expiration Date**

7. REQUIRED ITEMS CHECKLIST

☐ **A completed copy of this application**

☐ **A copy of your State Trade License (if applicable)**

☐ **A copy of your State Driver's License**

_____
Driver's License Number **State**

8. READ AND SIGN

I hereby certify by my signature below that: 1) I posses and will maintain all required licenses certifying that I am properly credentialed to do the work I will do, 2) I understand that I am the person solely responsible for inspections and all related fees and charges, 3) I agree to abide by all laws and ordinances governing this type of work whether specified herein or not, and 4) I have read and examined this application and know the same to be true and correct.

_____
Signature

_____
Date Signed

OFFICE USE ONLY

City Official:

☐ **Approved**
☐ **Denied**

_____
Signature

_____
Date Signed

NOTES:

_____

_____

_____

_____

NOTICE: ✓ **Incomplete applications will not be accepted.**
✓ **A copy of your current trade licenses required where applicable.**
✓ **A copy of your State Driver's License is required.**

MAIL OR DELIVER TO:

Community Development
P.O. Box 969 | 720 W. Willow Ave.
Duncan, OK 73534

(580) 252-0250 Voice
www.cityofduncan.com