CONTRACTOR VERIFICATION FORM

TYPE OF CONTRACTOR LICENSE

_____ ELECTRICAL CONTRACTOR
_____ MASTER ELECTRICIAN
_____ JOURNEYMAN ELECTRICIAN
_____ MASTER SIGN ELECTRICIAN

_____ MASTER PLUMBER
_____ JOURNEYMAN PLUMBER

_____ MECHANICAL (HVAC)

_____ IRRIGATOR (LANDSCAPE)
_____ BACKFLOW ***(special form required)***

_____ OTHER
_____

CONTRACTOR INFORMATION

COMPANY NAME: _____ PHONE: _____

EMAIL ADDRESS: _____

COMPANY ADDRESS: _____

CITY, STATE, ZIP: _____

LICENSEE NAME: _____

LICENSEE NUMBER: _____ PHONE: _____

ADDRESS (MAILING): _____

CITY, STATE, ZIP: _____

SIGNATURE: _____ DATE: _____

PLEASE PROVIDE COPY OF DRIVER'S LICENSE AND STATE LICENSE

For City use only