RENEWAL APPLICATION FOR
CONTRACTOR'S LICENSE
CITY OF ROBSTOWN

PLEASE PRINT ALL INFORMATION. DATE _____

NAME OF BUSINESS _____

TYPE OF CONTRACTOR ( ) SIDING ( ) ROOFING ( ) BUILDING

( ) SIGN ( ) OTHER _____

ADDRESS OF BUSINESS _____
STREET NAME & NUMBER OR P.O. BOX

_____
CITY STATE ZIP CODE

BUSINESS TELEPHONE NO. ( ) _____

E-MAIL_____

APPLICANT'S NAME _____

DATE OF BIRTH _____

DRIVER'S LICENSE NO. _____ STATE _____

APPLICANT'S ADDRESS _____
STREET NAME & NUMBER OR P.O. BOX

_____
CITY STATE ZIP CODE

APPLICANT'S TELEPHONE NO. ( ) _____

APPLICANT'S SIGNATURE _____

Ordinance No. 719 states "It shall be the duty of every contractor or builder, who shall make contracts for the erection or construction or repair of buildings for which a permit is required**…**to pay a license tax in the sum of **$75.00**.

**********FOR OFFICE USE ONLY**********

Lic. No. _____ Rec. No. _____ Occup. Lic. No. _____