

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

**Section  
A**

# City of Round Rock Texas Contractor Information Sheet

Company Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Office Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

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**Section**

**B** Please Select One

Contractor Type: General Plumbing Mechanical Electrical Irrigator

License Holder's Name: \_\_\_\_\_

License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
dd/mm/yyyy

Electrical Contractor License Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_  
dd/mm/yyyy

**FORM MUST BE SIGNED BY LICENSE HOLDER**

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Forward To:

**Building Inspection Department**

**Email: [BuildingPermits@RoundRockTexas.gov](mailto:BuildingPermits@RoundRockTexas.gov)**