



DEVELOPMENT SERVICES DEPARTMENT BUILDING PERMITS & INSPECTIONS DIVISION

**Home
Improvement
Contractor
Application**

1. **Company or Business Name:**

2. **Company or Business Address and Phone Number**

_____ Phone _____
3. **If this Company or Business name and Address has been used for less than ONE (1) year, list the previous company name and address used within the last FIVE (5) years.**
 - a. _____

 - b. _____

 - c. _____

 - d. _____

4. **Number of years company has been in existence:** _____
5. **Applicant Name** _____
6. **Are you the principal Owner or Operator of the Company? Yes _____ No _____**
7. **Address** _____ **Phone** _____
8. **Date of Birth:** _____

Do you, as the Principal Owner or Operator of the company, have a final criminal conviction of theft, or deceptive business practices under the Texas Penal Code, and said conviction arose out of conduct related to the home remodeling business? Yes _____ No _____

If yes, give date and county in which conviction was entered:

Must Be **COMPLETELY** Filled Out



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Have the judgments been satisfied? (attach proof) _____

I, as Principal Owner or Operator of the Company, acknowledge the following:

- That I understand that both I, and the Company I represent , have the duty to comply with The City of El Paso's Administrative Code.
- That I understand that in order to be eligible to obtain building permits from The City , I must file the application required by Section 18.02.108.1.2.7 of El Paso Building Construction – Administrative Code
- That I have received a copy of the Section 18.02.108.1.2 of the Building and Construction – Administrative Code
- That all statements I have made in this application are true and correct

Signature of Principal Owner or Operator of the Company

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For Notary Only

STATE OF TEXAS

COUNTY OF EL PASO

Acknowledged before me on this _____ day of _____, 20____

By _____

Print Name of Owner



STATE OF TEXAS NOTARY PUBLIC , Signature

Must Be **COMPLETELY** Filled Out