



City of Kemah, Texas
Department of Community Services

Contractor Registration Form

Contractor Code: _____

License #: _____

Contractor Information

Type of License: _____

Company Name: _____ Phone: _____

Address: _____

City, St, Zip: _____

Contractor E-mail _____

Licensee Name: _____ Licensee Number: _____

Licensee Phone: _____

Licensee Address: _____

City, St Zip: _____

Licensee Email _____

Signature: _____

- Provide Copy of Driver's License
- Provide Copy of State Issued License (if applicable)
- Provide Copy of insurance with City of Kemah as certificate holder

Contractor Fees:

General (In State)	\$75
General (Out of State)	\$150
Electrician	NO FEE
Mechanical	\$75
Plumber	NO FEE

License Fee: _____

Check or Cash: _____

Date: _____

Registration Valid for 1 calendar year from date of issuance. Contractor must provide updated information if license or insurance expires within the valid registration period.