



**ATTN CONTRACTORS:**

**PLEASE REVIEW THE FOLLOWING PAGE. THERE ARE EIGHT (8) ITEMS REQUIRED TO PROCESS YOUR LICENSE APPLICATION.**

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

**IF YOU HAVE ANY QUESTIONS ABOUT THE REQUIREMENTS PLEASE CALL OUR BUILDING DEPARTMENT AT (512) 398-3461 ext. 237**

**THANK YOU.**

**BUILDING INSPECTIONS  
DEPARTMENT**

**CITY OF LOCKHART APPLICATION FOR CLASS \_\_\_\_\_ BUILDING CONTRACTOR LICENSE # \_\_\_\_\_**

APPLICATION IS FOR: [ ] NEW [ ] RENEWAL § [ ] INDIVIDUAL [ ] PARTNERSHIP [ ] CORPORATION

This is to certify that I, \_\_\_\_\_, do hereby apply to the City of Lockhart for a Building Contractor's License and agree to comply with the provisions of Ordinance No. 93-06, Sec 6-21, passed on July 6, 1993, and any amendments thereto, the same otherwise known as the Building Contractor's License section. I acknowledge that noncompliance of this ordinance may cause revocation of my Building Contractor's License. I further understand that it is my responsibility to obtain all proper building permits required for jobs performed by me or any representatives of my company, and that it is my responsibility to inform the homeowner of the City's requirements to secure permits and to call for inspections.

1. Full Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

2. Business Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Bona Fide Office Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. If Corporation or Partnership, state the full name and address of each corporate officer or partner, and attach a copy of the articles of incorporation or partnership papers.

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

4. How long have you been at this address? \_\_\_\_\_

If less than five (5) years, previous address \_\_\_\_\_

5. Have you or any members of this partnership or corporation ever received a Building Contractor's License? \_\_\_\_\_

If so, please give date (s) of issuance: \_\_\_\_\_ Date(s) of expiration: \_\_\_\_\_

6. List previous business names, if any, used within the last ten (10) years. Be specific and attach a separate sheet if necessary.

7. How long have you been in business under this name? \_\_\_\_\_

8. How many years of experience do you have in this business? \_\_\_\_\_

List the most recent two projects you have completed that are similar to the license class for which you are applying:

Date	Address/Location	Property Owner/Contact	Permit #	Phone #

Date	Address/Location	Property Owner/Contact	Permit #	Phone #

DATE

SIGNATURE

STATE OF TEXAS

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me, a Notary Public in and for the State of \_\_\_\_\_, \_\_\_\_\_ County, and this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public

DATE: \_\_\_\_\_ BUILDING OFFICIAL \_\_\_\_\_

TYPE	CLASS	FEE REQUIRED		LICENSE REQUIREMENTS	
		NEW	RENEWAL	NEW	RENEWAL
<ul style="list-style-type: none"> <li>• CITY OF LOCKHART BUILDING CONTRACTOR:</li> </ul> <p>For class distinctions see below.</p>	A	\$150	\$100	<ol style="list-style-type: none"> <li>1. Completed &amp; Notarized Application</li> <li>2. Valid Driver's License or I.D. Card</li> <li>3. Three (3) Letters of Reference</li> <li>4. Telephone Verification (<i>Copy of Phone Bill Accepted</i>)</li> <li>5. Legal Description of Bona Fide Office</li> <li>6. Partnership Agreement or Articles of Incorporation</li> <li>7. Bond</li> <li>8. Applicable <u>New</u> License Fee</li> </ol>	<ol style="list-style-type: none"> <li>1. Completed Application (<i>Notarization not required</i>)</li> <li>2. Current Bond</li> <li>3. Applicable <u>Renewal</u> License Fee</li> </ol>
	B	\$100	\$50		
	C	\$50	\$25		

**CITY OF LOCKHART**

**BUILDING CONTRACTOR CLASSIFICATIONS:**

- CLASS A:** Contractors qualified to construct, alter, repair, add to, subtract from, improve, convert, or enlarge ANY building, structure, or utility.
- CLASS B:** Contractors qualified to construct dwellings containing no more than two (2) residential units; alter, repair, add to, subtract from, improve, convert or enlarge dwellings; repair commercial or industrial buildings.
- CLASS C:** Contractors qualified to alter, repair, add to, subtract from, or improve single-family residences; may perform repairs to existing residential, commercial, or industrial buildings where no change or impairment of physical structure is involved.

**BUILDING CONTRACTOR - BOND REQUIREMENTS:**

**If Value (Estimated Cost) of Permit is:**

**Required Bond is:**

\$50,000.00 or more	\$10,000.00
\$15,001.00 to \$50,000.00	\$ 5,000.00
Less than \$15,000.00	\$ 1,000.00

**Licensed Movers will carry general liability insurance in the amount of \$250,000.00**