CITY OF DALLAS
MECHANICAL CONTRACTOR REGISTRATION

Form Must Be Completely Filled Out In Order
To Be Accepted For Registration

Original Registration: The License Holder must personally appear at 320 E. Jefferson Blvd. Room 210, Dallas 75203 and furnish (1) This original completed form, (2) The License Holder’s current A/C pocket license, (3) The License Holder’s approved photo identification, (4) Payment of $120.00. Checks made payable to “City of Dallas”.

Renewal Registrations: May be processed in person by the license holder at any Building Inspection office or online through the contractor’s Dallas webpage. (1) All documents listed above are required on each registration renewal. (2) If not renewing in person, this document must be notarized. (3) Payment of $120.00 as detailed above.

Please Note: Mechanical Certificates of Registration provided for in this code, expire when the State license expires. Pursuant to the City Code, application is hereby made for Registration as a Mechanical Contractor.

All information must be complete (Do Not Use “Same”)

Company Information

Date: _____ / _____ / ______ License#: TACL __________________________

License Expiration Date: _____ / _____ / ______ Contr.: # __________________

Name of Company: __________________________

Company Address: __________________________

Mailing Address: __________________________

Phone Number: (_____ ) __________ Fax number: (_____ ) ___________

If company is located within the city limits of Dallas provide one of the following:

C.O. # __________________________ Home Office form on file _____ Yes _____ No

Responsible License Holder Information:

Name: __________________________ Home Phone#: (_____ ) __________

Home Address: __________________________

Driver’s License Number: __________________________ E-Mail Address: ____________ (Optional)

Personnel authorized by the License Holder to sign permits on the behalf of the License Holder. License Holder shall be listed first. Please limit additional personnel.

Name (Limit to 4 digits or less) Pin #

1. (License Holder) __________________________ __________________________

2. __________________________ __________________________

3. __________________________ __________________________

4. __________________________ __________________________

5. __________________________ __________________________

I do depose and say the above information is true and correct.

Signed X __________________________

Signature of Responsible License Holder

Registration Clerk/Notary Public __________________________

(Must Be Signed by Registration Clerk or Notarized)

Sworn to me before this _____ Day of ___________ 20_____

ANY CHANGES OR CORRECTIONS TO THE ABOVE INFORMATION MUST BE SUBMITTED ON THIS SAME FORM AND MARKED AS SUCH. A RECORD CHANGE FEE OF $30.00 SHALL APPLY

Revised: 1/18/18