

Service Center – One Texas Center 505 Barton Springs Road, Austin, TX 78704; (512) 978-4000

Contractor's Letter of **Authorization**

Please Fax to Service Center: (512) 974-1226

To complete this form electronically: Open with Internet Explorer, then <u>Click Here to Save</u> and continue.

Please Print Clearly or Type				Date:		
Contractor Type (select one): Ger	neral Contractor	Electrical	Mechanical	Plumbing	Irrigation	
General Contractor Name:						
Trade Master License Holder Name:						
GC or Trade Master License Holder E						
Office #: () Fa	ax #: ()	N	lobile #: ()			
Company Name:						
Mailing Address:						
City:				Zip	:	
State Master Electric License #:		State Master Electric Contractor License #:				
State Master Plumber License #:		State Master Mechanical License #:				
State Master Irrigator License #:		State Master Fire Line Contractor License #:				
Contractor's Letter of Authorization for PLEASE NOTE – "Add thereit Add and/or delete agents below. If you	ling Agents" below fore, all authorize d	will result in del d agents must l	etion of previous be added below.	agents on record,		
Add Agents N/A		a a) agaa p				
_	Last Name:		Email:	Email:		
	Last Name:					
First Name: Las	Last Name:					
First Name: Las	Last Name:		Email:	Email:		
First Name: Las	Last Name:		Email:	Email:		
First Name: Las	Last Name:					
Delete Agents						
First Name:	Middle Initial:	Last N	ame:			
First Name:	Middle Initial:	Last N	ame:			
First Name:	Middle Initial:	Last N	ame:			
Signature: General Contractor or Mass	er Licensed Contra	actor as listed a	bove Print Na	me		