



CITY OF KILLEEN CONTRACTOR REGISTRATION

ELECTRICAL CONTRACTOR * (NO FEE) <input type="checkbox"/>	STATE LICENSE No. ISSUED To: (IF APPLICABLE) _____ _____ _____ _____
FIRE SUPPRESSION CONTRACTOR <input type="checkbox"/>	
GENERAL CONTRACTOR <input type="checkbox"/>	
LAWN IRRIGATION CONTRACTOR <input type="checkbox"/>	
MECHANICAL CONTRACTOR * (NO FEE) <input type="checkbox"/>	
PLUMBING CONTRACTOR * (NO FEE) <input type="checkbox"/>	
SIGN CONTRACTOR <input type="checkbox"/>	
SWIMMING POOL CONTRACTOR <input type="checkbox"/>	
BUSINESS NAME :	
BUSINESS ADDRESS : STREET: _____	
CITY: _____ STATE: _____ ZIP: _____	
MAILING ADDRESS : STREET: _____	
(IF DIFFERENT) CITY: _____ STATE: _____ ZIP: _____	
CONTRACTOR NAME :	
PHONE ()	CELL PHONE()
SIGNATURE OF APPLICANT:	DATE:
EMAIL:	
For Department Use Only	
App. No. _____ Issued By: _____ Fee: _____	
EXPIRES : DECEMBER 31	

*State law prohibits municipalities from charging registration fee for plumbing, mechanical and electrical contractors.

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