

**CITY OF PASADENA
APPLICATION FOR SIGN CONTRACTORS LICENSE**

NAME: _____ DL #: _____
ADDRESS: _____ SS #: _____
STATE: _____ ZIP: _____ HOME TELEPHONE: _____ CITY: _____
BUSINESS NAME: _____
BUSINESS ADDRESS: _____ CITY: _____
STATE: _____ ZIP: _____ BUSINESS TELEPHONE: _____
PREVIOUS EMPLOYER: _____ JOB TITLE: _____
TYPE OF WORK: _____ FROM: _____ TO: _____
PRESENT EMPLOYER: _____ JOB TITLE: _____
TYPE OF WORK: _____ FROM: _____ TO: _____

AUTHORIZED PERSON (S) TO OBTAIN PERMITS (S) ON THIS LICENSE:

NAME (PLEASE PRINT)	SIGNATURE	DRIVERS LICENSE NUMBER

IN ORDER TO REMOVE AN INDIVIDUAL FROM YOUR LICENSE, THERE MUST BE A SIGNED AND NOTARIZED LETTER ON FILE WITH THE PERMIT DEPARTMENT.

STATE OF TEXAS
COUNTY OF HARRIS

_____ BEING DULY SWORN, DEPOSES AND SAYS: I HEREBY CERTIFY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT.

APPLICANT SIGNATURE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY OF _____, _____.

NOTARY PUBLIC IN AND FOR THE
STATE OF TEXAS

FOR OFFICE USE ONLY

THIS APPLICATION HAS BEEN APPROVED BY THE SIGN DEPARTMENT.

SIGN INSPECTOR

PSI # _____