

Contractor's Information
Company Name:
Contractor's Name:
Contractor's License Number:
Contractor's Email Address:
Contractor's Phone Number:

The licensed individuals listed below are authorized to apply for a trade permit with the City of Bastrop Planning Department on behalf of the above identified master licensed contractor.

The City of Bastrop Planning and Development Department may retain a copy of this form for our records and maintain a file as a courtesy. The form with the most recent date shall supersede all previous authorizations on file and **remain in effect until a new form is filed by the contractor.** 

I understand that it is the licensed contractor's responsibility to provide a copy of this form every time they would like to add or remove authorized agents.

## Print full name(s) of authorized agents & license number:

1.			
	_		
2.			

Date

3. \_\_\_\_\_

4. \_\_\_\_\_

Signature of Master Licensed Contractor