



Contractor's Agent Authorization Form

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. _____

3. _____

2. _____

4. _____

Signature of Master Licensed Contractor

Date