

Contractor Number:		
Expiration Date:	_/	/

CITY OF ALLEN

305 Century Parkway Allen, Texas 75013 214-509-4130

IRRIGATION CONTRACTOR AFFIDAVIT

BUSINESS ADDRESS:	CITY:	ST:	ZIP:	
PHONE:	FAX:			
CONTRACTOR NAME:				
ADDRESS:	CITY:	ST:	ZIP:	
PHONE:	FAX:			
STATE LICENSE #:	EXPIRATION	EXPIRATION DATE:		
EMAIL ADDRESS:				
SIGNATURE:	DATE:			
ATTEST: THE STATE OF TEXAS:	COLLIN COUNTY			
BEFORE ME, the undersign	ned, a Notary Public in and for said Co	ounty and State, on th	nis day personally appeared	
subscribed to the forgoing i	nstrument, and acknowledge to me that xpressed.		•	
	GIVEN UNDER MY HAND	AND SEAL OF OFFI	ICE THIS	
	THE DAY	OF		
(SEAL)		NOTARY PUBLIC	8/09	