



**CITY OF UNIVERSAL CITY**  
2150 Universal City Blvd., Universal City, Texas 78148  
Phone: (210) 659-0333 Fax: (210) 659-7062

**DEVELOPMENT SERVICES DEPARTMENT**

**REGISTRATION APPLICATION FOR SIGN CONTRACTOR /ELECTRICAL SIGN CONTRACTOR**

Attached is an application packet for application of contractor license for Sign Contractor or Electrical Sign Contractor. The following information is required:

<b>Sign Contractor-</b>	allows installation and maintenance of commercial signs. License fee - \$150.00
<b>Electric Sign Contractor-</b>	allows installation, maintenance and electrical wiring of commercial signs. A Master Electricians license with Universal city is also required and must be applied for separately. License fee - \$200.00 initially, then \$100 annual renewal

**Please complete the following information for application of a sign license:**

- Application
- Sign Contractor's Bond in the amount of \$5,000.00. The city's form must be used for initial application, which is attached.
- Reference from two (2) customers that you have installed signs for in the last three years. Blank forms are attached for your use.
- Certificate of Insurance with Universal City assigned as the holder.
- Copy of State of Texas Sign Contractor's License.
- Copy of current driver's license for all applicants.

If applying for an Electrical Sign Contractor's License, please complete all information as stated above and include a current copy of your Universal City Master Electrician's License and State Electrical License. A separate application is required for a Universal City Master Electrician's License. Please request the required application forms.

All information as stated above including license fee must be returned in complete form by the applicant and before processing will begin.

If you have any questions, please contact the Department of Development Services at (210) 659-0333, Extension 214, 217 or 220. You may find additional information regarding city codes on our website at [www.universalcitytexas.com](http://www.universalcitytexas.com).

**APPLICATION FOR REGISTRATION**

**CITY OF UNIVERSAL CITY, TEXAS**

**Please indicate the type license you are applying for:**

\_\_\_\_\_ Sign Contractor          \_\_\_\_\_ Electric Sign Contractor

I/We \_\_\_\_\_ wish to apply to the City of Universal City for a \_\_\_\_\_ license.

(1) State full name, date of birth, driver's license number and State of the applicant.

\_\_\_\_\_

Is applicant an individual, a partnership or a corporation? \_\_\_\_\_

Business Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Business Phone \_\_\_\_\_ Fax # \_\_\_\_\_

(2) If partnership or corporation, state the full name, address, date of birth, driver's license number and State of each partner or principal officer:

\_\_\_\_\_

\_\_\_\_\_

(3) How long have you been in this type business? \_\_\_\_\_

(4) How long in the business under this present company name? \_\_\_\_\_

(5) If less than ten years, previous business or employment \_\_\_\_\_

(6) If less than ten years, list previous company names

\_\_\_\_\_

\_\_\_\_\_

(7) Do you hold a Commercial Sign Contractor's license in another city? \_\_\_\_\_ If so, Name the city or cities. \_\_\_\_\_

(8) List the names of those people whom you wish to authorize to obtain permits for your company

\_\_\_\_\_

\_\_\_\_\_

(9) Have you or any member of this partnership or corporation even been arrested or convicted of a felony or misdemeanor involving moral turpitude? \_\_\_\_\_ If yes, explain

\_\_\_\_\_

\_\_\_\_\_

(10) Have you or any member of this partnership or corporation ever been convicted of a violation of the International Building Code, International Residential Code, National Electric Code or any code of the City of Universal City? \_\_\_\_\_ If yes, explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(11) References: Form letters are attached for your convenience, or you may use your own. References must include two customers that you have done work for within the past three years in reference to the type of license you are applying for. All references must be in letter form and submitted with your application. Do not provide a list of references.

**STATE OF TEXAS**

**COUNTY OF BEXAR**

BEFORE ME, the undersigned authority on this day personally appeared \_\_\_\_\_ known to me to be the person whose name is signed to the foregoing application and, duly sworn to be, states under oath that he/she has read said application and that all of the facts therein and all attachments hereto are true and correct and that he/she is qualified by either training or experience to conduct the aforementioned business.

\_\_\_\_\_  
Applicant

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas  
My Commission Expires: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Date Application Received \_\_\_\_\_ Fee Paid \$\_\_\_\_\_ Cash or Check

UC Contractor License Number \_\_\_\_\_ Date Issued \_\_\_\_\_

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



ATTN: Development Services Department

Date \_\_\_\_\_

**TWO CUSTOMER REFERENCES**

Name of Contractor Requesting Reference \_\_\_\_\_

Your name was given as a reference by the Contractor applicant as stated above who is applying for a contractor's license with the City of Universal City.

In order to consider the applicant's request for a license we are interested to know of your experience with the contractor as one of his/her customers. Please answer the following questions:

How long have you known the applicant? \_\_\_\_\_

What type of work has the applicant done for you? \_\_\_\_\_

How long ago was the work performed? \_\_\_\_\_

Was the work performed and completed to your satisfaction? \_\_\_\_\_

Please comment on the applicant's overall character and workmanship ability and your experience as a customer

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\_\_\_\_\_  
Customer Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Customer Signature

**RETURN TO APPLICANT CONTRACTOR. DO NOT FORWARD TO THE CITY.**

The applicant will not be considered until all replies are returned. Thank you for your cooperation.



ATTN: Development Services Department

Date \_\_\_\_\_

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\_\_\_\_\_  
Customer Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Customer Signature

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