

City of Lake Worth
Building Department
3805 Adam Grubb
Lake Worth ,Texas 76135
817-237-1211 X 230 Fax 817-237-1333
Email: smeason@lakeworthtx.org



MECHANICAL CONTRACTOR VALIDATION

CONTRACTOR INFORMATION

Company Name:		Contact:	
Address:	City:	State:	Zip:
Phone:	Fax:	Email:	

PERMIT INFORMATION

Permit Number:	Type of Permit:
Permit Address:	

VALIDATION STATEMENT

I do hereby acknowledge that the aforementioned company will be performing the mechanical work for the job address listed above. I understand that I will be responsible for any and all mechanical work done under this permit.	
Signature:	Date:
Printed Name:	Title: