



**CITY OF BRYAN
COMMUNITY DEVELOPMENT SERVICES**

**BRYAN'S UNIFIED INFILL LOT DEVELOPMENT
B.U.I.L.D. INITIATIVE**

Registration Form

**City of Bryan
Community Development Services
405 West 28th Street
Bryan, Texas 77803
(979) 209-5175**

**CITY OF BRYAN
B.U.I.L.D. INITIATIVE REGISTRATION FORM**

I. APPLICANT(S) INFORMATION (INDIVIDUAL, PARTNERS, OR BUSINESS)

Partnership/Sole Proprietorship/Individual

Name(s): _____

Business Address: _____

Primary Mailing Address: _____

(City) (State) (Zip Code)

Primary Phone: (____) _____

Federal Income Tax Business I.D. #: _____

Owner: _____

Driver's License #: _____ State: _____

Social Security #: _____

Are you current on all property taxes? Yes No

Partner: _____

Driver's License #: _____ State: _____

Social Security #(s): _____

Are you current on all property taxes? Yes No

Corporation

Name: _____

Business Address: _____

Primary Mailing Address: _____

(City) (State) (Zip Code)

Primary Phone: (_____) _____

Federal Income Tax Business I.D. #: _____

Charter #: _____

Is the corporation current on all property taxes? Yes No

II. PROOF OF CAPACITY (COMPLETE AT LEAST ONE CATEGORY)

A. Certified Public Accountant Statement of Financial Position

Name of Accountant or Firm: _____

Mailing Address: _____

(City) (State) (Zip Code)

B. List a financial or banking reference

Name of Institution: _____

Mailing Address: _____

(City) (State) (Zip Code)

**ATTACH ACCOUNTING AND BANK DOCUMENTS TO APPLICATION AS WELL
AS ADDITIONAL BANK REFERENCES IF NECESSARY**

V. REFERENCES

List a local supplier where your firm has past or present credit dealings (in Brazos and surrounding counties):

Name of Firm: _____

Contact Person: _____

Mailing Address: _____

(City) (State) (Zip Code)

Is there any outstanding litigation, judgments, or claims pending against the contractor or firm? Yes No If yes, describe: _____

VI. CONTRACTOR ACKNOWLEDGMENT

I hereby certify that the information given by me in this application is true and correct to the best of my knowledge. I further certify that I have read the conditions and requirements herein stated and fully understand and agree to abide by the same. Acting in addition to my official capacity for the contractor, I acknowledge that I am personally liable for the actions of the contractor in its dealings with any contract awarded by the City of Bryan. Attached (if this is a corporation) is written proof that the undersigned is authorized to act on behalf of the corporation.

Authorized Signature: _____

(Print)

Authorized Signature: _____

(Print)

(Date)