



CONTRACTORS' VOUCHER COMMUNITY SERVICES

OFFICE PHONE – 972/744-4180 • INSPECTION REQUEST – 972/744-4181 • FAX – 972/744-5802

(COMPLETE THIS WHEN THE WORK IS ASSOCIATED WITH A BUILDING PERMIT)

Project Address	Application Number
General Contractor's Name	
I will request all necessary inspections required by the City of Richardson to assure inspections and compliance with all city regulations applicable for the proposed work. I further realize this voucher must be filed with the city building inspection department prior to requesting an inspection.	

Electrical		
Electrical Contractor's Name	Phone Number	Fax Number
Description Of Work		
Master Electrician's Name	License Number	
Applicant's Name (Please Print & Sign)	Company Title	

Mechanical		
Mechanical Contractor's Name	Phone Number	Fax Number
Description Of Work		
A/C & Refrigeration License Holder's Name	State License Number	
Applicant's Name (Please Print & Sign)	Company Title	

Plumbing / Gas		
Plumbing contractor's name	Phone Number	Fax Number
Description Of Work		
Master Plumber's Name	State License Number	
Applicant's Name (Please Print & Sign)	Company Title	

Concrete		
Concrete contractor's name	Phone Number	Fax Number
Description Of Work		
Applicant's Name (Please Print & Sign)	Company Title	

Date	Initials
------	----------