



Registered Contractor Code of Ethics

The Development Services Department's top responsibility is to protect the welfare, health, and safety of the community through the responsible oversight of development as such, the Development Services Department advocates that this commitment to excellence be demonstrated and adopted by all registered contractors and is embodied in the following Code of Ethics.

I		will adhere to all the following:
	(License Holder's Printed Name)	_

- Support the Development Services Department mission by foremost ensuring the health, safety, and welfare of the community by providing the highest quality service, materials, and techniques.
- Avoid practices that could be harmful to the public, including providing or installing any building materials, products or techniques that are known to be defective, substandard, or likely to cause harm.
- Stay informed of changes of ordinances and codes related to building and safety standards related to your profession and industry.
- Always maintain required insurance, registrations, licenses, or certifications and provide documented proof to customers upon request.
- Always display fairness, truthfulness, integrity, and act in good faith in all development business relationships with the community and the public.
- Refrain from deceptive or dishonest behavior that creates an unfair advantage for your company or any other person, entity, or organization.
- Negotiate openly and fairly with customers charging fair prices that are reasonable and in proportion with the labor and materials provided.
- Utilize a written contract that details the services to be performed, limitations, fees, and adhere to the intent and details of the agreement.
- Meet all contractual obligations in a timely and responsible manner.



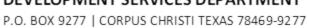
The Building Official may take any act	ion necessary to enforce this	s Code of Ethics and to ensur	e the integrity of the
Contractor Registration process.			

License Holder's Signature:	Date:



CITY OF CORPUS CHRISTI

DEVELOPMENT SERVICES DEPARTMENT





STAR Contractor Registration Application Form

Requested Category (check one): ☐ Bronze STAR ☐ Silver STAR ☐ Gold STAR					
Current City Degistration /	iconco No /if applies	, hla)			
Annlicant Name	icense no. (ii applica	able) Phone:			
Business Address:		City:	State:		
Zip Code:	Email:				
			litions □Roofing □Pools/Spas □' □Commercial Construction	^t Irrigation	
□Other Note: *State Licen	nses Required.	_			
Please submit the applicati	ion and all requested	litems to: DSoutreach@cct	exas.com.		
based on the City of Corpu	s Christi's Building O	•	qualify me for the program and a I that by qualifying for this progra nents of the category.		
Please list affiliated busine	esses if you would like	e them added as part of an	Incorporated business.		
Business Name:					
Phone Number:					
Address:					
Business Name:					
Phone Number:					
Address:					
Applicant's Name (please p	orint):				
Applicant Cinnet.		Data			

(Office Use Only)				
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Date Received:	_ Received by_			
Please check items received then forward to DBO				
☐ Current Permitting Fees ☐ Zero Verified Customer Complaints/Infractions ☐ 2 Trainings/Year ☐ Minimum 5 Year				
Registration □One Agent maintains ICC Certification □Local Professional Membership □ Approve Background				
Bronze	Silver	Gold		
\square Approved	☐ Disapprove	d		