

BUILDING AND ZONING DEPARTMENT
Room 304, Municipal Center West
Springfield, Illinois 62701 Phone: 217-789-2171

Application for Renewals

Electrical Application for the Year of _____

- Registered Electrical Contractor, complete entire application.
- Electrical License Only, complete items 2 and 6 only.
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1. **Registered Electrical Contractor**

Name of Business: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

2. **Electrical License**

Name of Person Licensed: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Relationship with Contractor: _____

Owner, Partner, Officer, (Pres. Sec.)

3. **License from**, enter City: _____
If Out-of-Town License, attach a current copy of your license.

4. **Bond**

Attach \$5,000 Surety Bond

- In its Original form
- In favor of the City of Springfield, Illinois
- Issued in your business name
- It shall run from January 1 to December 31 of each year. It is acceptable for the bond to be dated beyond December 31.

5. **Proof of liability insurance and workman's comp**

please attach a copy of the policy

6. FEE- (Check one only)

- _____ Electrical License Only (Springfield License) \$25 _____
- _____ Registered Electrical Contractor with Springfield License \$70 _____
(This includes \$25.00 license fee and \$45.00 registration fee)
- _____ Registered Electrical Contractor with Out-of-Town License \$45 _____

I, the undersigned, certify that the above information is accurate to the best of my knowledge and I hereby authorize the Commission and/or City Personnel to inquire into any of the above information.

Company: _____

Owner/Authorized Officer: _____ Date: _____

Email address _____

please print clearly