

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 5 only.

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.

Insurance Agency: _____
 Address of Agency: _____
 City, State, Zip: _____
 Telephone Number: _____

5. Fee - (Check Only One)

- | | | |
|-------|---|----------|
| _____ | Electrical License Only (Springfield License) | \$ 25.00 |
| _____ | Registered Electrical Contractor with Springfield License
(This includes \$25.00 license fee and \$45.00 registration fee) | \$ 70.00 |
| _____ | Registered Electrical Contractor with Out-of-Town License | \$ 45.00 |

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: _____