

APPLICATION FOR REGISTRATION AS AN ELECTRICAL CONTRACTOR

CITY OF GRANITE CITY, IL

Date: _____

Complete Both Parts & Return To:
City Electrical Inspector
Building & Zoning Department
2000 Edison Avenue
Granite City, IL 62040
(618) 452-6218

I, _____
(Name of Applicant)

Home Address: _____
(Home Address of Applicant)

AS THE AUTHORIZED OFFICER REPRESENTING _____
(Name of Company)

Business Address: _____
(Business Address of Company)

REPRESENT THAT THE FOLLOWING ARE OFFICERS OF SAID COMPANY (If Applicable):

Name of Officer	Officer Title	Officer Phone Number

I DO HEREBY MAKE APPLICATION FOR A CERTIFICATE OF REGISTRATION AS AN ELECTRICAL CONTRACTOR WITHIN THE CORPORATE LIMITS OF THE CITY OF GRANITE CITY, IL IN ACCORDANCE WITH THE REQUIREMENTS OF THE ELECTRICAL BOARD OF THE CITY OF GRANITE CITY, IL

GIVE COMPLETE RECORD BEGINNING WITH HIGH SCHOOL					
HIGH SCHOOL OR INSTITUTION:	LOCATION	FROM MM/YYYY	TO MM/YYYY	YEAR GRADUATED	MAJOR STUDIES
High School:					
College:					
Trade or Tech School:					