City of Blue Island ---- Building Dept.

13051 Greenwood Ave Blue Island, II 60406 708-597-8606 708-396-2686 Fax

ELECTRICAL CONTRACTOR APPLICATION

Date of Approval:	Application Fee: \$100
	For Office Use Only
Approval By:	Date Pd: Initials:
	(please print clearly or type)
Date of Application:	
Name of Business:	
Address:	
Phone:	
	pervising Electrician Information
S.E.Name:	Home Address:
	St: Zip:
	Fax (if any):
Plea	ase furnish the following if Corporation:
Corp. Name:	
President Name:	
Address:	City/St/Zip:
	Fax (if any):
Plea	se furnish the following if Partnership:
Name of Partnership:	
Name of Partner(s):	
	City/St/Zip:
Phone:	Fax (if any):
Plea	se furnish the following if Sole Proprietorship:
Name of Proprietor:	
Address:	City/St/Zip:
Phone:	Fax (if any):
Requirements:	
1. Bond made out to City of	
	(City of Blue Island as additional certificate holders)
3. Copy of license from eit	ther: Chicago, Orland Park, Naperville, etc.

Date:

Signature: