



**TOWN OF ADDISON**  
**16801 WESTGROVE DR.**  
**ADDISON, TX 75001**  
**Phone: 972/450-2880**  
**Email: Registrations@addisontx.gov**  
**ELECTRICAL CONTRACTOR**  
**REGISTRATION APPLICATION**

**Required Documentation:**

1. Copy of license
2. Copy of Contractor lic
3. Copy of driver license
4. Certificate of Insurance

**COMPANY NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**COMPANY ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**NUMBER** \_\_\_\_\_ **STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**email** \_\_\_\_\_

**OWNER OF COMPANY:**

**NAME** \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_

**NUMBER** \_\_\_\_\_ **STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_

**THOSE IN THE BUSINESS WHO ARE AUTHORIZED TO SIGN FOR PERMITS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PURSUANT TO THE REQUIREMENT OF THE TOWN OF ADDISON THAT ANY INDIVIDUAL PERSON, FIRM OR CORPORATION, ENGAGING IN THE ELECTRICAL BUSINESS EITHER SHALL BE A LICENSED MASTER ELECTRICIAN OR HAVE IN CONTINUOUS EMPLOY A LICENSED MASTER ELECTRICIAN, THE FOLLOWING PERSON SHALL BE DELEGATED FULL RESPONSIBILITY FOR THE SAFETY OF ALL WORK THAT MAY BE DONE ACCORDING TO THE NATIONAL ELECTRICAL CODE.

**MASTER ELECTRICIAN** \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_

**NUMBER** \_\_\_\_\_ **STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_ **LICENSE NO.** \_\_\_\_\_

**SIGNED** \_\_\_\_\_

**AUTHORIZED SIGNATURE**

**REGISTRATION #** \_\_\_\_\_

**EXPIRES:** \_\_\_\_\_