

APPLICATION FOR REGISTRATION AS MASTER ELECTRICIAN INCORPORATED VILLAGE OF WILLISTON PARK

494 Willis Avenue
Williston Park, NY 11596

CALENDAR YEAR - _____

License No. _____

Date of Application _____

I hereby make application to be registered as a Master Electrician in accordance with Chapter 83 of the Code of the Village of Williston Park and state that I have read and understand Chapter 83.

Name _____

Residence Address _____

City _____ State _____ Zip Code _____ Phone _____

Business Name _____

Business Address _____

City _____ State _____ Zip Code _____ Phone _____

Town of _____ Master Electricians Lic. # _____

SIGNATURE OF APPLICANT

REQUIRED: Copy of Current Master Electrician's License
Certificate of Liability Insurance
Certificate of Workers Compensation Insurance Required