

APPLICATION FOR REGISTRATION AS MASTER ELECTRICIAN

INCORPORATED VILLAGE OF WILLISTON PARK

494 Willis Avenue
Williston Park, NY 11596
Telephone 516-746-2193
Fax 516-746-7109

CALENDAR YEAR - _____

Date of Application _____

Name of Electrician _____

Business Name _____

Business Address _____

City _____ State _____ Zip Code _____ Phone _____

Master Electricians License No.: _____

Jurisdiction of License: _____

SIGNATURE OF APPLICANT

REQUIRED DOCUMENTS:

1. Copy of Current Master Electrician's License
2. Certificate of Liability Insurance
3. Certificate of Workers Compensation Insurance – Not on an Accord Form
4. \$100.00 Application Fee

Insurance forms must be made out to the Village of Williston Park as the Certificate Holder