



**Montgomery County
Department of Permitting Services**

255 Rockville Pike, 2nd Floor
Rockville, MD 20850-4166
Phone: 311 in Montgomery County or (240)777-0311
Fax: (240)777-6262
<http://www.montgomerycountymd.gov/dps>



Application for Electrical Contractor's Business License Sole Proprietorship or Partnership

FOR OFFICE USE ONLY		
License No: _____	Check No: _____	Fee Paid: _____
Receipt No: _____	Issue Date: _____	Expiration Date: _____
Approved { } Disapproved { }		
Member, Board of Electrical Examiners, Montgomery County Maryland		Date _____
<p>*To review our current licensing procedures & fees please visit our website or Call 311 or 240-777-0311 if outside Montgomery County, for the current fee schedule NOTE: FEES MAY BE SUBJECT TO ANNUAL CHANGES EFFECTIVE JULY 1ST.</p>		

APPLICATIONS THAT ARE NOT COMPLETE WILL BE RETURNED – PLEASE PRINT

B. Section A-1: (If Located Out-of-State) Is the Company/Corporation qualified to do business in Maryland?

{ } No { } Yes (If Yes: Complete Resident Agent information below)

Name of Resident Agent: _____ Phone Number: _____

Resident Agent's Address: _____

C. Section A-2: Licensed Masters and/or Limited Master(s) responsible for supervision of work.

Name: _____ License No.: _____

Name: _____ License No.: _____

Limitations (if any): _____

D. Section B-1: Identification

Name of Corporation/Company: _____

Address: _____

Telephone No.: _____ E-Mail Address: _____

E. Section B-2: Ownership in applicant form.

President: _____ % of Ownership: 100%

Address: _____

Date of Birth: _____ Telephone No.: _____

F. Section C: References

Bank: _____

Three material suppliers: _____

Two general business references: _____

G. Section D: Licenses and violations:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Has applicant or partner ever filed for bankruptcy or insolvency? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Has Corporation ever had an Electrical License or bond suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Are there any electrical code violations outstanding against Corporation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Are there any pending law suits or unsatisfied judgments outstanding against the Corporation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Has any officer or owner been convicted of a criminal offense other than traffic violations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

(If YES to any of the above questions, give dates, license #, and details on a separate sheet.)

H. Affidavit

"I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF." I further authorize the release of any information contained within this application to an authorized representative of the Department of Permitting Services for further investigation.

Original Signature – Owner: _____

Print Name: _____ Date: _____

NOTE: As of 06/01/2017 Updated/Current copies of the Certificate of Liability Insurance MUST be submitted by email to the following address: #DPS.ElectricalCertificatesOfInsurance@montgomerycountymd.gov