DEPARTMENT OF BUILDING AND ZONING OF COOK COUNTY, ILLINOIS

Timothy P. Bleuher COMMISSIONER OF BUILDING AND ZONING OF COOK COUNTY



County Administration Building 69 W. Washington, Suite 2830 Chicago, IL 60602-3169 TEL (312) 603-0500 FAX (312) 603-9940 TDD (800) 526-0857

ELECTRICAL CONTRACTOR REGISTRATION APPLICATION

(PLEASE PRINT)

COOK COUNTY REGISTRATION NUMBER
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CHECK APPROPRIATE BOX

___INDIVIDUAL ___PARTNERSHIP __CORPORATION

NAME OF BUSINESS: ADDRESS OF BUSINESS: TELEPHONE NUMBERS: BUSINESS: ______ CELL PHONE: _____ FAX: _____ HOME: _____ E-MAIL ADDRESS: _____ SUPERVISING ELECTRICIAN'S NAME: _____ LICENSED (CITY/STATE): NUMBER OF YEARS AS CONTRACTOR: _____ HAVE YOU BEEN REGISTERED HERE BEFORE? _____ IF SO, UNDER WHAT CONTRACTOR NAME? DATE: _____ SUPERVISING ELECTRICIAN'S SIGNATURE: **OFFICIAL USE ONLY:** REMARKS: _____ **APPROVED BY:** ELECTRICAL INSPECTOR:

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ELECTRICAL CONTRACTOR REGISTRATION AFFIDAVIT

I CERTIFY THAT THE STATEMENTS ON THIS APPLICATION FOR AN ELECTRICAL CONTRACTOR REGISTRATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I ALSO CERTIFY THAT I HAVE REVIEWED THE COOK COUNTY BUILDING ORDINANCE, AND THE 2014 COOK COUNTY ELECTRICAL CODE, AND UNDERSTAND THEM AND WILL ABIDE BY APPLICABLE PROVISIONS BEFORE, DURING, AND AFTER CONSTRUCTION OR ALTERATION OF ANY ELECTRICAL WORK. I UNDERSTAND THAT IT IS MY OBLIGATION TO NOTIFY THE BUILDING COMMISSIONER WHEN AN ELECTRICAL JOB IS COMPLETED IN ORDER FOR ME TO OBTAIN A CERTIFICATE OF OCCUPANCY. FAILURE TO DO THIS IS AN AUTOMATIC VIOLATION OF THE COOK COUNTY BUILDING ORDINANCE CERTIFICATE OF COMPLIANCE SECTION 5.4-3(A) (1) (2) (3) (4) (5) (6), WHICHEVER IS APPLICABLE AND WILL BE REFERRED TO THE COOK COUNTY STATE'S ATTORNEY FOR APPROPRIATE ACTION.

I FURTHER CERTIFY THAT I AM AWARE OF STATE STATUTES PROHIBITING BRIBES AND SHALL NOT MAKE OFFERS OF GIVE CONTRIBUTIONS OR GRATUITIES TO ANY EMPLOYEE OF THE COOK COUNTY DEPARTMENT OF BUILDING AND ZONING TO INFLUENCE THEIR ACTION. (ANY SUCH ACTIVITY WILL BE REFERRED TO THE COOK COUNTY STATE'S ATTORNEY FOR APPROPRIATE ACTION).

SUPERVISING ELECTRICIAN'S SIGNATURE: _____

COMPANY NAME: _____

FOR OFFICE USE ONLY:

COOK COUNTY REGISTRATION NUMBER: _____

APPROVED BY ELECTRICAL INSPECTOR: _____