



Carroll County, Maryland 2013-2015 Electrical License Renewal/New Form

PLEASE PRINT ALL INFORMATION

Carroll County License #		MD State Lic.#		Expires:	
--------------------------	--	----------------	--	----------	--

Type of License: (Please check the appropriate box)

<input type="checkbox"/>	Master Electrician: - General	Inactive: <input type="checkbox"/>
<input type="checkbox"/>	Master Electrician - Restricted - Category _____	
<input type="checkbox"/>	Master Electrician: - Limited	

Full Name:

(First)	(Middle)	(Last)	(Sr., Jr., III, etc)
---------	----------	--------	----------------------

Company Name*:

Mailing Address:

(Street Address or P.O. Box)	(Town)	(Zip)
------------------------------	--------	-------

Email Address:

Company Phone #:	Company's Fax #:
------------------	------------------

Cell Phone#:	Home Phone #:
--------------	---------------

*Is this a new company name since your last Carroll County renewal or application? _____
 Please Note: A licensed master electrician can only sign permits for himself/herself or company, not both, in Carroll County; the licensee can only be self-employed or be employed by 1 electrical company, not both at the same time for the purpose of securing permits, whenever the licensee has at least 1 electrical permit outstanding in Carroll County.

The following section is to be completed by the license holder.

I, _____, solemnly affirm under the penalties of perjury, that I will uphold the Carroll County Electrical Ordinance. I understand that I can not sign permits for more than one company or individual. I can not allow any unlicensed person (unless employed by my company and under my direct supervision) to do electrical wiring under the authority of my license. I understand that I am responsible for having all permits under my license finalized before the permit will be cleared from my license. I understand that a violation of these requirements could result in suspension or revocation of my license.

License Mechanic Signature: _____

License Mechanic Printed Name: _____

For Office Use Only

Master General: \$70.00 Limited: \$70.00 Restricted: \$60.00 Inactive: 1/2 Fee
 Make Checks Payable to Carroll County Commissioners

Date Rec'd _____ Amount Paid _____ Receipt # _____ Initials _____