



**Annual Registration Form
Electrical Contractor**
All applicable information must be provided

City of Port Huron
100 McMorran Boulevard
Port Huron, MI 48060
Phone: (810) 984-9733
www.porthuron.org

Applicant Information

Business Name:	Qualifying Officer:
Address:	Federal ID:
City, State, Zip:	Phone Number:
Email Address:	

Workers Compensation

A current certificate of liability in regard to worker's compensation must be provided to us, by your insurance company.

Carrier:	Policy Number:
Issued:	Expires:
MESC Number: (or reason for exemption):	

License Information

Please Present Your State ID and License(s) to Permit Clerk

Contractor Type:	
<input type="checkbox"/> Electrical Contractor	<input type="checkbox"/> Fire Alarm Contractor
<input type="checkbox"/> Master Electrician	<input type="checkbox"/> Sign Specialist
State License Number:	License Expiration Date:
MESC Number (or reason for exemption):	

Permits will only be issued to the contractor applying for a permit or their qualifying licensee when authorized in writing on company letterhead by the contractor. It is the contractor's responsibility to notify this office in writing on company letterhead if they no longer authorize their qualifying licensee to apply for permits. The following must be provided with the application:

1. Registration fee of \$30.
2. Copy of **Contractor** and **Master's** license must be attached to the application.
3. Letter(s) of authorization for qualified agent(s) of company if not License Holder/Owner of Company.
4. Clear copy of driver's license for the person the license was issued to.

_____ Date

_____ License Contractor Signature

Payment: Cash _____ Check _____ Credit Card _____

Received by: _____ **Date received:** _____