

For Office Use Only:

License # \_\_\_\_\_

**CITY OF SOUTH MILWAUKEE**

2424 15<sup>th</sup> Avenue

South Milwaukee, WI 53172

Phone: (414) 768-8054

Fax: (414) 768-8068

**APPLICATION FOR ELECTRICAL LICENSE**

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Include area code) \_\_\_\_\_

Application is hereby made to employ \_\_\_\_\_ as supervising electrician for the above named firm for the year ending June 30, 2010 subject to the regulation of the City of South Milwaukee as provided by ordinance.

- ( ) Individual is the sole proprietor of the firm.
- ( ) Individual is employed on a full-time basis (30 or more hrs per week) for the above named firm.

Signed \_\_\_\_\_

Official Title \_\_\_\_\_

Master Electrician No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

License Fee \$ 50.00

Renewal Fee \$ 35.00

**STATE OF WISCONSIN**

County of Milwaukee ss \_\_\_\_\_ being duly sworn on oath and says that he is a citizen of \_\_\_\_\_ County, State of Wisconsin, and that he has had four years practical experience in general electrical work, and that he is eligible as per record on file in the office of the Electrical Inspector to supervise all electrical work permitted under license and herein applied for.

Signed \_\_\_\_\_

Address \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for Milwaukee County, Wisconsin

\_\_\_\_\_  
My Commission Expires

Date Approved: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary Bd. of Elec. Examiners