

Building Department
2828 Sheridan Road
Zion, Illinois 60099



(847) 746-4018
www.cityofzion.com

ELECTRICAL CONTRACTOR'S REGISTRATION

COMPANY NAME: _____

Company owners name: _____

Address: _____

City _____ State _____ Zip _____

Office phone number: (____) _____ Cell number: (____) _____

Email address: _____

License #: _____ With: _____

Authorized agents: (Those who are allowed to sign for permits. They must hold an electrical license, provide the city with a copy, and have valid picture ID on file)

Name: _____ License #: _____

Name: _____ License #: _____

Name: _____ License#: _____

Signature of License Holder

Date