



Class "B" ELECTRICIAN'S LICENSE

Name:	
Where are you licensed?	License #:
Mailing Address:	
Phone:	Email:
Troy job name/location:	
Signature:	

PLEASE ATTACH THE FOLLOWING:

- 1) Form C-105.2, Certificate of Workers Compensation Insurance or Form CE-200, Certificate of Attestation of Exemption. See <http://www.wcb.ny.gov/content/onlineforms/obtainC105.jsp> for further information.
- 2) Copy of your electrical license.
- 3) Plans and/or drawings for proposed job.
- 4) A check in the amount indicated below, made payable to Troy City Clerk:
 Residential (3 or fewer units), \$200.00
 Antenna/Solar, \$300.00
 Commercial, \$500.00

Mail completed application to:

Code Enforcement
433 River Street
Troy, NY 12180

For Code Enforcement Use:

Approved: _____ Date: _____

SEAL

License Issued:

City Clerk _____ Date _____