

**TRUMBULL COUNTY  
BUILDING DEPARTMENT**

Trumbull County Electrical Department  
159 East Market ST, Suite 100  
Warren, Ohio 44481  
Phone: 330-675-2468  
Fax: 330-675-2862

Dear Registration Applicant:

Renewal of your Electrical Registration will be due on January 1 each year. Registration shall expire on December 31, 12:00 midnight each year and shall be renewed by the Chief Electrical Inspector upon application by the holder (Article 12 and 14). Electrical work shall not be performed without a current Trumbull County Electrical Registration (Article 5). Registration not renewed by January 31 will be cancelled.

**Checklist for Electrical Registration:**

- \_\_\_\_\_ Completed and Notarized Electrical Registration Application.
- \_\_\_\_\_ Current valid State of Ohio Electrical License. **(Provide a copy)**
- \_\_\_\_\_ Trumbull County Surety Bond Form. **(Must use form provided).**
  - \_\_\_\_\_ Seal on Bond Form.
  - \_\_\_\_\_ Bond shall be in the Registration Holder's Name, **(Fill in Exact Name(s) and assignee Business entity as appear on State of Ohio License).**
  - \_\_\_\_\_ Registration Holder shall sign as Principal.
  - \_\_\_\_\_ Power of Attorney shall be attached to the Bond Form.
- \_\_\_\_\_ Proof of Liability Insurance in an Amount of not less than One Million dollars (1,000,000.00) on any one accident or occurrence.
- \_\_\_\_\_ Proof of Compliance of the Worker's Compensation Law's of the State of Ohio. (If you are a sole proprietor, you must submit such statement on your letterhead and attach to the application).
- \_\_\_\_\_ Fee of Two Hundred Dollars (\$200.00) Payable to the Trumbull County Building Department.
- \_\_\_\_\_ **Return this Checklist with Application.**

Mail all requirements together to avoid return of an incomplete application. Mark envelope ATTENTION: CHIEF ELECTRICAL INSPECTOR.

**ELECTRICAL REGISTRATION APPLICATION**

TRUMBULL COUNTY BUILDING DEPARTMENT

159 EAST MARKET ST, SUITE 100

WARREN, OHIO 44481

PHONE: 330-675-2468

Please be advised that I am employed full time and my Trumbull County Electrical Registration is to be used exclusively by (information listed below must be as indicated for State of Ohio License):

Company Name _____	Name _____
Address _____	Address _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Federal ID# _____	Phone _____
Phone _____	Mobile _____
Fax _____	E-mail _____
Mobile _____	

Are you incorporated under the laws of the State of Ohio?  Yes  No

If incorporated, what is the exact name of the corporation or company?

\_\_\_\_\_  
If not incorporated, what is the exact name you are doing business as?

Current Trumbull County Registration # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Current State of Ohio Electrical License # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Current Worker's Compensation # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

If you are sole proprietor attach such statement, on your letterhead, to this application.

**Revocation of Trumbull County Electrical Registration**

Loss of registration violations:

Upon presentation to the Trumbull County Electrical Board of charges that the holder of any registration has willfully or negligently violated any provisions of the Ohio Codes, National Electrical Code, or the Trumbull County Electrical Standards, the Electrical Board shall notify the holder of said registration to be present at such meeting. Such notification shall be in writing and shall be delivered to the holder at least five (5) days in advance of said meeting.

**Reasons for Revocation of Registration**

Failure to renew State of Ohio License by expiration date.

Failure to pay registration fees.

Failure to maintain Surety Bond and Worker's Compensation.

Failure to maintain Liability Insurance and Completed Operations.

Lending of one's license or allowing other companies to use one's registration to do electrical work.

Repeated violations of codes or standards.

Other just cause.

**CONTRACTOR'S QUALIFICATION STATEMENT**

TYPE OF WORK:

- \_\_\_\_\_ ELECTRICAL
- \_\_\_\_\_ WARM AIR HEATING
- \_\_\_\_\_ AIR CONDITIONING
- \_\_\_\_\_ WET HEATING

1. ORGANIZATION

1.1 HOW MANY YEARS HAS YOUR ORGANIZATION BEEN IN BUSINESS AS A CONTRACTOR? \_\_\_\_\_

1.2 HOW MANY YEARS HAS YOUR ORGANIZATION BEEN IN BUSINESS UNDER ITS BUSINESS NAME? \_\_\_\_\_

1.21 UNDER WHAT OTHER OR FORMER NAMES HAS YOUR ORGANIZATION OPERATED? \_\_\_\_\_

1.3 IF YOUR ORGANIZATION IS A CORPORATION, ANSWER THE FOLLOWING:

1.31 DATE OF INCORPORATION:

1.32 STATE OF INCORPORATION:

1.33 PRESIDENTS NAME:

1.34 VICE-PRESIDENTS NAME (S):

1.35 SECRETARY'S NAME:

1.36 TREASURER'S NAME:

1.4 LIST JURISDICTION IN WHICH YOUR ORGANIZATIONS PARTNERSHIP OR TRADE NAME IS FILED. \_\_\_\_\_

2. LICENSING

2.1 LIST JURISDICTION AN TRADE CATEGORIES IN WHICH YOUR ORGANIZATION IS LEGALLY QUALIFIED TO DO BUSINESS, AND INDICATE REGISTRATION OR LICENSE NUMBERS, IF APPLICABLE.

2.2 HAS ANY OF YOUR COMPANIES REGISTRATIONS OR LICENSE BEEN REVOKED OR SUSPENDED? \_\_\_\_\_  
IF SO, WHY:

3. EXPERIENCE

- 3.1 LIST THE CATEGORIES OF WORK THAT YOUR ORGANIZATION NORMALLY PERFORMS WITH ITS OWN FORCES.
  
- 3.2 ARE THERE ANY JUDGEMENTS, CLAIMS, ARBITRATION PROCEEDINGS OR SUITS PENDING OR OUTSTANDING AGAINST YOUR ORGANIZATION OR ITS OFFICERS?
  
- 3.3 HAS YOUR ORGANIZATION FILED ANY LAW SUITS OR REQUESTED ARBITRATION WITH REGARD TO CONSTRUCTION CONTRACTS WITHIN THE LAST FIVE YEARS?

4. REFERENCES

- 4.1 TRADE REFERENCES (2):
  
- 4.2 PERSONAL REFERENCES (2):
  
- 4.3 SURETY:
  - 4.3.1 NAME OF BONDING CO.:
  - 4.3.2 NAME AND ADDRESS OF AGENT:

5. SIGNATURE \_\_\_\_\_

5.1 Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

Name of organization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BY: \_\_\_\_\_  
Title: \_\_\_\_\_

\_\_\_\_\_ being duly sworn deposes and says that the information provided herein is true and sufficiently complete so as no to be misleading.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
**Notary**

**TRUMBULL COUNTY  
ELECTRICAL CONTRACTOR'S BOND**

**KNOW ALL MEN BY THESE PRESENT**, That I, the undersigned (fill in exact name (s) and assignee business entity as appear on State License)

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YOUR FULL NAME AND ADDRESS AS APPEARS ON STATE LICENSE

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LIST ALL BUSINESS NAMES THAT YOU USE

Of the City of \_\_\_\_\_, State of \_\_\_\_\_,  
as Principal and \_\_\_\_\_ as  
Surety, are held firmly bound onto the County of Trumbull, Ohio, in the sum of Ten  
Thousand and 00/100 Dollars (\$10,000.00), lawful money, for the payment of which,  
well and truly to be made we bind ourselves, our heirs, executors, administrators,  
and assigns firmly by these presents.

**THE CONDITIONS OF THE ABOVE OBLIGATIONS ARE SUCH THAT, WHEREAS,**  
the above name principal has made application to the County of Trumbull, Ohio, for  
registration as a Electrical Contractor for a term of one year beginning \_\_\_\_\_  
and ending December 31, 20\_\_\_\_ pursuant to and under the provisions of the  
resolutions of Trumbull County, Ohio.

**NOW, THEREFORE,** if the said Principal, during the term of said registration shall  
well and faithful indemnify and save harmless Trumbull County from all loss and  
damage that may be occasioned in any ways by accidents, caused by the negligence  
or by the want of care, skill or attention on his or its part or on the part of anyone in  
his or its employ; faithfully observe all federal and state law as applicable and all  
resolution of Trumbull County, governing the installation or the alteration,  
replacement, repair, design, or service of any electrical work within Trumbull County,  
Ohio, then this obligation shall be void otherwise, to remain in full force and effect;  
the same may be sued on at the instance of any person, firm or corporation with  
whom the said principal may hereafter contract to do said work for any damage  
sustained by said person, Firm or Corporation on account of the Failure of said  
principal to perform the work contracted for in accordance with the resolutions and  
the rules and regulations aforesaid.

**IN TESTIMONY WHEREOF, we have hereunto set our hands this \_\_\_\_\_**  
**day of \_\_\_\_\_, 20\_\_\_\_\_.**

**NOTE: Power of Attorney must  
be attached to all bonds and  
renewals.**

**SEAL MUST APPEAR ON BOND FORM.**

\_\_\_\_\_  
**Name of Registration Holder**

**BY:** \_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
**Surety**

**BY:** \_\_\_\_\_  
SIGNATURE