

**CITY OF MAUMEE DIVISION OF BUILDING & INSPECTION**  
**400 CONANT ST.**  
**MAUMEE, OHIO 43537**  
**419-897-7075**  
**(FAX) 419-897-7182**  
**(EMAIL) INSPECTION@MAUMEE.ORG**

**APPLICATION FOR CERTIFICATE OF QUALIFICATION**

I hereby make application for Certificate of Qualification in the following class:

**ELECTRICAL**

- Electrical Contractor, General\* - \$150
- Electrical Contractor, Residential - \$150
- Electrical, Journeyman - \$50
- Electrical, Apprentice - \$20

**HEATING AND COOLING**

- Heating & Cooling, Contractor\* - \$150
- Refrigeration, Contractor\* - \$150
- Heating & Cooling, Journeyman - \$50
- Refrigeration, Journeyman - \$50
- Heating & Cooling, Apprentice - \$20
- Refrigeration, Apprentice - \$20

**GENERAL**

- General Contractor - \$75

**\*State of Ohio License required**

**PLUMBING**

- Master Plumber, Contractor\* - \$150
- Master Steamfitter, Contractor\* - \$150
- Journeyman, Plumber - \$50
- Steamfitter, Journeyman - \$50
- Apprentice, Plumber - \$20
- Steamfitter, Apprentice - \$20

**FIRE PROTECTION**

- Certified Sprinkler, Contractor\* - \$150
- Certified Sprinkler, Journeyman - \$50
- Certified Sprinkler, Apprentice - \$20

**MISCELLANEOUS**

- Sign Contractor (\$50,000 Liability) - \$75
- Sewer Contractor (provide \$5,000 Bond) - \$150
- Sidewalk Contractor (provide \$5,000 Bond) - \$75
- Alarm Contractor\* - \$150

OWNER NAME \_\_\_\_\_ CELL PHONE # \_\_\_\_\_

COMPANY/TRADE NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

OFFICE PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

- ALL JOBS REQUIRING A PERMIT SHALL BE REVIEWED AND APPROVED PRIOR TO STARTING WORK.
- **APPROVED SET OF DRAWINGS MUST BE KEPT ON THE JOB SITE.**
- **REQUIRED INSPECTIONS SHALL NOT BE DONE UNLESS APPROVED DRAWINGS ARE PRESENT.**
- ALL JOBS CONTRACTED WITHIN THE CITY OF MAUMEE, NOT REQUIRED TO BE ISSUED A PERMIT, SHALL BE CALLED INTO THE DIVISION OF BUILDING PRIOR TO WORK STARTING.
- NO SUB CONTRACTORS SHALL COMMENCE WORK WITHIN THE CITY BEFORE OR UNTIL THEY HAVE REGISTERED WITH THE DIVISION OF BUILDING.

The information on this application is true to the best of my knowledge and that falsification of any information submitted shall constitute revocation of my Certificate of Qualification to work in the City of Maumee.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FEES ARE NOT TRANSFERABLE OR REFUNDABLE**

**FOR OFFICE USE ONLY: CERT. # \_\_\_\_\_**