CITY OF CAPE GIRARDEAU, MO. APPLICATION FOR INACTIVE LICENSE

(APPLICANT NAME)	_, do hereby request that the City of Cape
(APPLICANT NAME)	
Girardeau declare the following licenses INACTIVE:	
[] MASTER ELECTRICIAN [] DRAINLAYER [] MECHANICAL INSTALLER [] JOURNEYMAN PLUMBER [] MASTER PLUMBER	[] JOURNEYMAN ELECTRICIAN [] RESIDENTIAL ELECTRICIAN [] ELECTRICAL MAINTENANCE [] SIGN CONT, ELECTRICIAN
I understand that having done so, I waive	my right to obtain permits and perform said work
within the city limits of Cape Girardeau.	Furthermore, I understand that performing such
work within the City of Cape Girardeau under an inactive license could result in revocation	
or suspension of my license(s) by the Board of Examiners.	
FURTHERMORE, at such time that I request my license to become active, I will furnish proof of liability insurance and workman's compensation to the City of Cape Girardeau	
and pay all required licensing fees.	*
	APPLICANT SIGNATURE
	DATE
DIVISION OF INSPECTION SERVICES	
DATE	