

Memphis and Shelby County Office of Construction Code Enforcement

6465 MULLINS STATION MEMPHIS, TENNESSEE 38134

OFFICE-901-222-8390 FAX-901-222-8367

RULES AND PROCEDURES STATE LICENSED CONTRACTOR REGISTRATION

This registration packet must be filled out by the Qualifying Agent if you're a licensed State of Tennessee Contractor please provide the Qualifying Agent Affidavit Letter see number 2 below for the phone number.

- (1.) Contractors shall be properly licensed by the State of Tennessee Licensing Board, as required by the State Contractor's Licensing Law. A copy of the State License Certificate showing the license classification shall be attached to the registration form.
- (2.) Contractors licensed by the State shall obtain a affidavit letter from the State of Tennessee Contractors board to verify Qualifying Agent. **(CONTACT-1-615-741-8307)**
- (3.) Contractors licensed by the State of Tennessee shall obtain and include a Memphis & Shelby County Business License with their registration. Please call **(901)222-3000** for additional information in obtaining this license. **ADDRESS:1075 Mullins Station Rd 38134 or 150 Washington 2nd Floor – Memphis, TN 38103**
- (4.) Contractors licensed by the State shall obtain a contractor registration application packet from the Licensing Department of Shelby County Code Enforcement which includes the following:
 - (a.) Contractor name (as listed on State Certificate), mailing address, area code, and telephone number.
 - (b.) Qualified agent's information on input document.
 - (c.) Limited Power of Attorney attachment in the event of permits being pulled at the absence of the Qualifying agent. Only (2) Power of Attorney attachments may be added to each license holder.
 - (d.) Complete input document for the person(s) receiving Power of Attorney
 - (e.) Current copy of State License and Current copy of Shelby County Business License
 - (f.) A completed in put document for any individual listed in the application.**(to include photo ID)**

All forms shall be properly executed and returned with the applicable fee to the License section prior to issuance of a permit. **MAKE ALL CHECKS PAYABLE TO CCE. REGISTRATION FEE WILL BE \$50 CHECK OR CASH ACCEPTED!**

Your cooperation in complying with these requirements will prevent any delay in approval of your registration and issuance of permits.

Memphis and Shelby County Office of Construction Code Enforcement

6465 MULLINS STATION MEMPHIS, TENNESSEE 38134

(Registration Code #)
(Office Use Only)

BUILDING CONTRACTOR REGISTRATION

STATE OF TENNESSEE:

COUNTY OF SHELBY:

(Last) (First) (Middle)

(Date of Birth: Month Day Year)

(Address: Street Number) (Street Name) (Apt/Ste #)

(City) (State) (Zip Code)

(Firm Name) (Shelby County Business Number)
(Please attach copy)

(Address: Street Number) (Street Name) (City & State) (Zip Code)

(E-Mail Address) (Phone Number) (Fax Number)

(State of Tennessee Contractor License Number) (Classifications)
(Please attach a copy of State License)

I CERTIFY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT
AND UPON RECEIPT OF REGISTRATION AGREE TO COMPLY WITH
ALL REQUIREMENTS OF THE JOINT BUILDING CODE GOVERNING WORK
IN MEMPHIS AND SHELBY COUNTY.

Signed: _____ Date: _____



Memphis and Shelby County Office of Construction Code Enforcement

LICENSE INPUT DOCUMENT

Qualifying Agent Company Owner Company Official Project Mgr. Other: Specify Below: _____

LAST NAME	FIRST NAME	M.I.
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STREET NUMBER	STREET NAME (INCLUDING DR., CV., RD. ETC.)	APT #
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CITY	ST	ZIP CODE
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AREA CODE	HOME PHONE NO.	DATE OF BIRTH
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SEX	RACE	HEIGHT	FT	IN	WEIGHT	EYES	HAIR
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CURRENT EMPLOYER/COMPANY NAME

CURRENT EMPLOYER/COMPANY ADDRESS

CITY	STATE	ZIP	EMPLOYER/COMPANY PHONE
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EMPLOYER/COMPANY FAX	EMPLOYER/COMPANY E-MAIL ADDRESS
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SIGNATURE & DATE: _____

For office use only

ADD	CHANGE	DELETE	LICENSE REGISTRATION NUMBER	STATE CLASS CODE(S)
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DATE ACCEPTED BY OCCE: _____ BY: _____

SPECIAL POWER OF ATTORNEY TO OBTAIN PERMITS
(Separate document required for each appointment - maximum of two appointments per grantor)
PLEASE PRINT

I, as grantor, (name of person making the appointment): _____

(title): _____

of (company name in full): _____

which is a (sole proprietorship, partnership, corporation, or other--identify): _____

(address of company): _____

Tennessee License No.: _____

do hereby appoint (name of appointee): _____

of (address of appointee): _____

to act on behalf of me and the company named above to apply, pay for, and obtain:

Any Building Mechanical Electrical Plumbing

permits from the Memphis & Shelby County Office of Construction Code Enforcement (OCCE).

This Special Power of Attorney shall become effective upon presentation and acceptance of a completed form with OCCE, and shall remain in effect until applicant or his/her successor notifies OCCE that this Special Power of Attorney is revoked.

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STATE OF _____)

COUNTY OF _____)

Signature of grantor

Print grantor's name

PERSONALLY SUBSCRIBED BEFORE ME this the _____ day of _____, 20____.

NOTARY PUBLIC

My commission expires: _____



Memphis and Shelby County Office of Construction Code Enforcement

LICENSE INPUT DOCUMENT

License # _____

Qualifying Agt. Company Owner Company Official Project Mgr. Other:
Specify: _____

LAST NAME FIRST NAME M.I.

STREET NUMBER STREET NAME (INCLUDING DR., CV., RD. ETC.) APT #

CITY STATE ZIP CODE

AREA CODE HOME PHONE NO. DATE OF BIRTH

SEX RACE HEIGHT FT IN WEIGHT EYES HAIR

CURRENT EMPLOYER/COMPANY NAME

CURRENT EMPLOYER/COMPANY ADDRESS

CITY STATE ZIP EMPLOYER/COMPANY PHONE

FAX NUMBER E-MAIL ADDRESS

SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY

ADD CHANGE DELETE LICENSE REGISTRATION NUMBER STATE CLASS CODE(S)