



**CITY OF COLUMBIA**  
**APPLICATION FOR NEW OR RENEWAL OF QUALIFICATION CARD**  
**PLANNING AND DEVELOPMENT SERVICES DEPARTMENT**  
**INSPECTIONS DIVISION**  
**P.O. BOX 147, CITY OF COLUMBIA, SOUTH CAROLINA 29217 (803) 545-3420**

**\$5.00 PER YEAR, PER TRADE**

Receipt No. \_\_\_\_\_ Date \_\_\_\_\_

I do hereby make application for the following City of Columbia Qualification Card(s):

(Check all that apply)	(Check one)	Qualification Card # (for renewals)	OR State License # (for new)
<input type="checkbox"/> Electrical	<input type="checkbox"/> New <input type="checkbox"/> Renewal	# _____	
<input type="checkbox"/> Gas	<input type="checkbox"/> New <input type="checkbox"/> Renewal	# _____	
<input type="checkbox"/> Mechanical	<input type="checkbox"/> New <input type="checkbox"/> Renewal	# _____	
<input type="checkbox"/> Plumbing	<input type="checkbox"/> New <input type="checkbox"/> Renewal	# _____	
<input type="checkbox"/> Commercial Exhaust	<input type="checkbox"/> New <input type="checkbox"/> Renewal	# _____	

Name \_\_\_\_\_

Address \_\_\_\_\_

Present Employer \_\_\_\_\_

Address \_\_\_\_\_

Fee in the amount of \$ \_\_\_\_\_ attached, \_\_\_\_\_

Applicant's Signature

**DO NOT WRITE BELOW THIS LINE**

Application Received \_\_\_\_\_ By \_\_\_\_\_

Qualification Card issued on \_\_\_\_\_ Delivered to applicant by, mail,

(Note: Qualification Cards expires December 31 each year unless renewed for an extended time period at \$5.00 per year for each extended year)

Revised December 2008

-----