

 **Hillsboro**  
OREGON  
**Master Electrical Permit Program**

MPE# \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_ requests to be included in the City of Hillsboro Master Permit Program.  
Business Name

The facility is located at: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Our MPP Owner, Operating Manager or Contractor will be \_\_\_\_\_,

Their contact phone number is \_\_\_\_\_.

Our on-site contact representative is \_\_\_\_\_, with license number  
\_\_\_\_\_, and contact phone number \_\_\_\_\_.

Within 10 days, a separate list of all licensed persons will be sent to the City of Hillsboro.  
I have received a copy of the City of Hillsboro's Master Permit Policy and agree to all  
provisions thereof.

\_\_\_\_\_  
Owner, Operating Manager or Contractor

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Print name of authorized person

\_\_\_\_\_  
Print name of Applicant

Name, address & phone number  
for billing correspondence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Master Permit Program Set-Up Fee**

YES     NO    \$100.00    Account. # 01-000-5-5-018-19-0    Check No. \_\_\_\_\_

**Development Services & Permitting Center**

Email [Permits@Hillsboro-Oregon.gov](mailto:Permits@Hillsboro-Oregon.gov) Phone 503-681-6153 Fax 503-681-5250 Web [Hillsboro-Oregon.gov/Permits](http://Hillsboro-Oregon.gov/Permits)