



HOWARD COUNTY **ONLINE COMPUTER REGISTRATION FORM**

Select one: Home Builder (MHBR) Home Improvement Contractor (MHIC)
 Maryland Business License Electrician (HoCo) Master HVAC/R (MD)
 Master Plumber/Gas Fitter (MD) Utility Contractor (HoCo)
 Architect (MD) Engineer (MD) Interior Designer (MD)
 Fire Sprinkler (MSC) Non-Water Based Extinguishing License (NW)

INSTRUCTIONS TO COMPLETE THE ONLINE REGISTRATION FORM:

The registration form must be completed only once prior to being permitted to use the online permitting in Citizen Access per license number issued. Once the form is completed and approved, it is kept on file within the Licenses and Permits Division, in the Howard County, Department of Inspections, Licenses and Permits.

Please follow as noted:

1. **Register and create an account** on our Citizen's Access website: myhoward.info
2. Complete the Online Registration Form, noting the "Authorized Agent" portion must match the information used to create the account, as noted above.
3. Email the following authorization documentation to permits@howardcountymd.gov with *Online Registration - License Number and Business Name* in the Subject Line. Please be sure to include the email address or user name used to create the online account in the body of the email (we do not need the password – username only):
 - a. Completed Online Registration Form, signed by the License Holder
 - b. Copy of the corresponding Maryland or Howard County License with current expiration date
4. Upon completion and approval of the registration form, the Licensee and their Agent (*if applicable*) becomes eligible to submit online permits, and further instruction will be provided via email regarding making application.
5. Once your registration has been approved and linked, you will be able to apply for certain types of permits online.

REGISTRATION FOR LICENSEE:

(This information must match the Maryland/HoCo Issued License)

License Number _____ Expiration Date _____

Name of Licensee _____

Business Name _____

Business Address _____

Street Address

City

State

Zip Code

Primary Phone _____ Business Phone _____ Fax _____

E-Mail _____

AUTHORIZED AGENT FOR THE LICENSEE – IF OTHER THAN STATED ABOVE:

(This information must match the account created through the Citizen's Access Portal)

Name of Individual _____

Business Name _____

Business Address _____

Street Address

City

State

Zip Code

Primary Phone _____ Business Phone _____ Fax _____

E-Mail _____

UNDER PENALTY OF PERJURY, THE LICENSEE AND PERMIT AGENT HEREBY CERTIFIES THAT THE INFORMATION PROVIDED ON THIS REGISTRATION FORM IS AUTHORIZED, TRUE, ACCURATE, AND COMPLETE.

SIGNATURE OF LICENSEE _____ **DATE** _____

Original or Digital (Certificate Based) Signature Required