

REQUEST TO ADD/DROP QUALIFIED INDIVIDUAL(S)

Mail completed form to: N.C. State Board of Examiners of Electrical Contractors, 3101 Industrial Drive, Suite 206, Raleigh, NC 27609

If you prefer, you may fax to: (800) 691-8399

DATE _____

1. NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE NUMBER: _____
CURRENTLY ISSUED IN THE NAME _____

2. CHANGE IS FOR: PRINCIPAL PLACE OF BUSINESS? BRANCH PLACE OF BUSINESS?

3. PLEASE PROVIDE THE NAME, SIGNATURE, SOCIAL SECURITY NUMBER, **AND** DATE OF EMPLOYMENT FOR EACH QUALIFIED INDIVIDUAL TO BE ADDED TO LICENSE:

UNDER STATE LAW, AN APPLICANT IS NOT REQUIRED TO INCLUDE A REFERENCE TO OR INFORMATION CONCERNING ANY ARREST, CHARGE OR CONVICTION THAT HAVE BEEN EXPUNGED

4. HAS THE OWNER, ANY PARTNER, ANY OFFICER, ANY MEMBER, OR ANY QUALIFIED INDIVIDUAL BEEN CONVICTED OF A **MISDEMEANOR** (EXCLUDING MINOR TRAFFIC VIOLATIONS) DURING THE PAST 3 YEARS?
 YES NO

HAVE YOU EVER BEEN CONVICTED OF A **FELONY**? YES NO

IF YES TO EITHER, EXPLAIN ON REVERSE SIDE OF THIS FORM AND PROVIDE A COPY OF THE COURT JUDGMENT. IF A COPY OF THE COURT JUDGMENT WAS PREVIOUSLY SUBMITTED, INITIAL HERE ____ AND DO NOT RE-SUBMIT.

5. FOR EACH QUALIFIED INDIVIDUAL TO BE REMOVED FROM LICENSE, ENTER NAME, SOCIAL SECURITY NUMBER AND **DATE EMPLOYMENT WAS TERMINATED** _____

6. CURRENT LICENSE CERTIFICATE ON WHICH CHANGE IS REQUESTED IS FORWARDED WITH THIS REQUEST ; HAS ALREADY BEEN FORWARDED TO THE BOARD .

7. SIGNATURE OF PRINCIPAL OWNER OR OFFICER OF FIRM REQUESTING THIS CHANGE:

SIGNATURE: _____ TITLE: _____

*******FOR BOARD USE ONLY*******

REQUEST APPROVED _____ BY _____ LICENSE RETURNED & DESTROYED _____

DATA ENTRY _____ BY _____ LICENSE PRINTED & MAILED _____