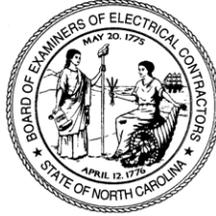


EXECUTIVE OFFICES
3101 Industrial Drive, Suite 206
Raleigh, NC 27609



TELEPHONE: 919/733-9042
FAX: 800-691-8399
WEB SITE: www.ncbeec.org

NC STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS

MEMORANDUM

TO: MILITARY PERSONNEL/MILITARY SPOUSES

FROM: N.C. STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS

**SUBJECT: APPLYING FOR NORTH CAROLINA ELECTRICAL CONTRACTING
 LICENSE**

Enclosed is the application packet for your use in applying for a North Carolina electrical contracting license pursuant to NCGS 93B-15.1 (a) establishing licensure by endorsement for eligible Military personnel and military spouses.

We are also enclosing a booklet containing the laws applicable to electrical contracting in North Carolina and the Board's rules (Title 21 NCAC 18B) for the implementation of the electrical contracting licensing laws in North Carolina.

After carefully studying all of this information, please submit your completed application, together with the additional required information as enumerated on the back of the application form, to: STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS, 3101 Industrial Drive, Suite 206, Raleigh, NC 27609 or by fax: (800) 691-8399.

You are hereby advised that until your firm has obtained a license from this Board, it is unlawful for it to engage or offer to engage in the business of electrical contracting in the State of North Carolina as defined in N.C.G.S. 87-43.

Please let us know if we can assist you in any way.

ENDORSEMENT FOR MILITARY PERSONNEL/SPOUSES
APPLICATION FOR NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE IN THE
LIMITED, INTERMEDIATE OR UNLIMITED CLASSIFICATION

MAIL TO: STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS
3101 INDUSTRIAL DRIVE, SUITE 206, RALEIGH, NC 27609

TELEPHONE: 919/733-9042

1. CLASSIFICATION OF LICENSE DESIRED (CHECK CLASSIFICATION): **LICENSE FEE MUST BE SUBMITTED WITH APPLICATION**

UNLIMITED \$180.00 FEE

INTERMEDIATE \$130.00 FEE

LIMITED \$85.00 FEE

2. LICENSE NAME:

(MUST BE EXACT NAME IN WHICH ELECTRICAL CONTRACTING BUSINESS WILL BE CONDUCTED IN NORTH CAROLINA)

MAILING ADDRESS _____

STREET, P.O.BOX OR RURAL ROUTE

CITY, STATE, ZIP

LOCATION ADDRESS _____

STREET, P.O.BOX OR RURAL ROUTE

CITY, STATE, ZIP

PHONE NUMBER:

BUSINESS (_____) _____

CELL (_____) _____

FAX NUMBER: (_____) _____

EMAIL: _____

3. INDICATE THE NATURE OF YOUR BUSINESS AND GIVE NAME OF OWNER, PARTNERS, OFFICERS OR MEMBERS BELOW:

SOLE PROPRIETORSHIP

PARTNERSHIP CORPORATION

LIMITED LIABILITY COMPANY

4. HOW DO YOU PLAN TO CONDUCT AN ELECTRICAL CONTRACTING BUSINESS?

FULL-TIME

PART-TIME

5. NAME, SIGNATURE AND SOCIAL SECURITY NUMBER OF EACH QUALIFIED INDIVIDUAL TO BE ADDED TO LICENSE:

FULL NAME

SIGNATURE

DATE OF BIRTH

SOCIAL SECURITY NUMBER

(IF MORE SPACE IS NEEDED, PLEASE ATTACH SEPARATE SHEET)

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

6. 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.

7. I/WE UNDERSTAND AND AGREE TO BE GOVERNED BY THE ELECTRICAL CONTRACTING LAWS AS CONTAINED IN CHAPTER 87, ARTICLE 4, OF THE GENERAL STATUTES OF NORTH CAROLINA, AND BY THE RULES AND REGULATIONS ADOPTED BY THE BOARD FOR THE IMPLEMENTATION OF THESE LAWS IN THE CONDUCTING OF MY/OUR ELECTRICAL CONTRACTING BUSINESS. I/WE AUTHORIZE THE BOARD TO RESEARCH AND VERIFY THE INFORMATION SUBMITTED CONCERNING THIS APPLICATION.

SIGNATURE OF APPLICANT _____

TITLE _____

8. **METHOD OF PAYMENT:**

CHECK

MONEY ORDER

CREDIT CARD

CARD# _____

EXP. DATE _____

SECURITY CODE _____

NAME ON CARD _____

SIGNATURE _____

BILLING ADDRESS _____

***** (DO NOT WRITE BELOW THIS LINE - FOR BOARD USE ONLY) *****

LICENSE # _____

EFFECTIVE DATE _____

BATCH/RECEIPT# _____

SCREENED (NASCLA DATABANK) _____

APPROVAL BY _____

MILITARY PERSONNEL/MILITARY SPOUSE

IMPORTANT-READ CAREFULLY
REQUIREMENTS FOR NORTH CAROLINA ELECTRICAL CONTRACTING

Pursuant to 93B-15.1, the North Carolina STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS will issue a license by endorsement to a military-trained applicant if the following conditions are satisfied:

ALL APPLICANTS:

- (1) Age of qualifying individual must be at least eighteen (18) years as certified by date of birth shown on front side of application.
- (2) Written statements from two responsible persons attesting to each qualifying individual's good character (**FORMS ENCLOSED**).
- (3) Written verification of minimum required electrical experience, as defined in Rule .0202, for specific license classification as described in Rule .0201 (b);
- (4) Written verification that applicant has engaged in an occupation of primary electrical experience as defined in Rule .0202 for at least two of the five years preceding the date application is filed with the Board;
- (5) Written verification that applicant has been awarded a military occupational specialty for land based electrical installations similar or equivalent to work performed by an electrical contractor and passed a military written or computer-based examination that is determined by the Board to be equal to the examination of holders of similar licenses issued by the Board;
- (6) **CORPORATIONS/LIMITED LIABILITY COMPANIES:** You must be registered with the **NORTH CAROLINA** Secretary of State before the Board can issue a license. Each corporation or limited liability company must obtain a **certificate of authority** from the NORTH CAROLINA Secretary of State (919) 807-2225.

FEES AND ADDITIONAL REQUIREMENTS:

LIMITED

- (1) Check or money order in the amount of **\$85.00** for the annual license fee payable to the North Carolina State Board of Examiners of Electrical Contractors.

INTERMEDIATE

- (1) Properly completed statement of bonding ability, together with proper power of attorney from a bonding company licensed to do business in the State of North Carolina, certifying applicant's ability to furnish performance bonds for electrical contracting projects in excess of \$50,000.00 per project (**STATEMENT OF BONDING ABILITY FORM** enclosed).
- (2) Check or money order in the amount of **\$130.00** for the annual license fee payable to the North Carolina State Board of Examiners of Electrical Contractors.

UNLIMITED

- (1) Properly completed statement of bonding ability, together with proper power of attorney from a bonding company licensed to do business in the State of North Carolina, certifying applicant's ability to furnish performance bonds for electrical contracting projects in excess of \$130,000.00 per project (**STATEMENT OF BONDING ABILITY FORM** enclosed).
- (2) Statements from two responsible persons attesting to each qualifying individual's ability to satisfactorily supervise and direct all electrical contracting business in the **UNLIMITED** classification (two **SUPERVISE AND DIRECT FORMS** enclosed).
- (3) Check or money order in the amount of **\$180.00** for the annual license fee payable to the North Carolina State Board of Examiners of Electrical Contractors.

NOTICE OF PENALTY FOR SUBMITTAL OF BAD CHECK

Pursuant to Rule .0107 of Title 21, Chapter 18B, of the North Carolina Administrative Code, any person, firm or corporation submitting a check to the Board which is subsequently returned because of insufficient funds or no account in bank will be charged the maximum processing fee allowed by G.S. 25-3-512 for processing such check; and, until the payer has made the check good and paid the prescribed processing fee, the payer will not be eligible to take an examination, review an examination, obtain a license or have a license renewed. Payment to the Board for making good such bad check and for the prescribed processing fee must be in the form of a cashier's check or money order.

STATEMENT OF BONDING ABILITY

The license applicant named below is required to furnish this statement of bonding ability with application to the North Carolina **STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS** for a license to engage or offer to engage in the business of electrical contracting in the State of North Carolina. This form should be completed by applicant's insurance agent or bonding company official.

DATE: _____

1. IDENTIFICATION OF LICENSE APPLICANT: EXACT NAME IN WHICH NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE IS TO BE ISSUED (**MUST BE EXACT NAME IN WHICH FIRM WILL BE CONDUCTING BUSINESS OF ELECTRICAL CONTRACTING IN NORTH CAROLINA**):

MAILING ADDRESS: STREET/P.O. BOX _____

CITY _____ STATE _____ ZIP _____

2. PLEASE LIST BY AMOUNT ONLY THE THREE LARGEST JOBS FOR WHICH YOUR COMPANY HAS BONDED THIS APPLICANT:

(a) _____ (b) _____ (c) _____

3. IS YOUR BONDING RELATIONSHIP WITH THIS APPLICANT SATISFACTORY AT THE PRESENT TIME: YES NO

IF **NO**, PLEASE EXPLAIN: _____

4. WHAT TYPE FINANCIAL STATEMENT DOES YOUR COMPANY REQUIRE FROM THIS APPLICANT?

(a) _____ INDEPENDENT ACCOUNTANT'S CERTIFIED STATEMENT
(b) _____ INDEPENDENT ACCOUNTANT'S UNAUDITED STATEMENT
(c) _____ STATEMENT PREPARED BY ACCOUNTANT

5. THE APPLICANT FOR AN **INTERMEDIATE** LICENSE IS REQUIRED TO PROVIDE SATISFACTORY VERIFICATION OF ITS/HIS ABILITY TO FURNISH **PERFORMANCE** BONDS FOR ELECTRICAL CONTRACTING PROJECTS HAVING A VALUE **IN EXCESS OF \$50,000.00**. SUBJECT TO YOUR NORMALLY EXPECTED INDIVIDUAL JOB UNDERWRITING PROCEDURES AND YOUR RIGHT NOT TO EXCEED THIS APPLICANT'S LINE OF BONDING CREDIT, DOES YOUR COMPANY FEEL THAT THIS APPLICANT WOULD BE ELIGIBLE ON THIS DATE FOR A BOND **IN EXCESS OF \$50,000.00**? (NOTE: THIS IS STRICTLY A BONDING ABILITY STATEMENT AS OF THE DATE SHOWN ABOVE AND IN NO WAY COMMITS YOUR COMPANY TO THE ISSUANCE OF A BOND OF ANY TYPE TO THIS APPLICANT.) YES NO

6. IS YOUR COMPANY DULY LICENSED TO TRANSACT BUSINESS IN THE STATE OF NORTH CAROLINA AND IN GOOD STANDING WITH THE NORTH CAROLINA DEPARTMENT OF INSURANCE? YES NO

THIS STATEMENT MUST BE SIGNED UNDER THE NAME OF THE BONDING COMPANY AND MUST BE SIGNED BY EITHER A COMPANY REPRESENTATIVE OR BY A DULY LICENSED AGENT OF THE COMPANY, AND THE COMPANY REPRESENTATIVE OR THE AGENT MUST **ATTACH POWER OF ATTORNEY** AUTHORIZING HIM/HER TO SIGN FOR THE BONDING COMPANY, **DATED THE SAME DATE AS SHOWN AT THE TOP OF THIS STATEMENT OF BONDING ABILITY**.

NAME OF BONDING COMPANY: _____

BY: _____ (SEAL)
Bonding Company Official

BOND AGENT/ATTORNEY IN FACT: _____

BONDING COMPANY ADDRESS WHERE COMPANY OFFICIAL IS LOCATED: _____

NAME OF INSURANCE AGENCY: _____

ADDRESS: _____

INTERMEDIATE

MILITARY PERSONNEL/MILITARY SPOUSE

STATEMENT OF BONDING ABILITY

The license applicant named below is required to furnish this statement of bonding ability with application to the North Carolina **STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS** for a license to engage or offer to engage in the business of electrical contracting in the State of North Carolina. This form should be completed by applicant's insurance agent or bonding company official.

DATE: _____

1. IDENTIFICATION OF LICENSE APPLICANT: EXACT NAME IN WHICH NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE IS TO BE ISSUED (**MUST BE EXACT NAME IN WHICH FIRM WILL BE CONDUCTING BUSINESS OF ELECTRICAL CONTRACTING IN NORTH CAROLINA**):

MAILING ADDRESS: STREET/P.O. BOX _____

CITY _____ STATE _____ ZIP _____

2. PLEASE LIST BY AMOUNT ONLY THE THREE LARGEST JOBS FOR WHICH YOUR COMPANY HAS BONDED THIS APPLICANT:

(a) _____ (b) _____ (c) _____

3. IS YOUR BONDING RELATIONSHIP WITH THIS APPLICANT SATISFACTORY AT THE PRESENT TIME: YES NO

IF **NO**, PLEASE EXPLAIN: _____

4. WHAT TYPE FINANCIAL STATEMENT DOES YOUR COMPANY REQUIRE FROM THIS APPLICANT?

(a) _____ INDEPENDENT ACCOUNTANT'S CERTIFIED STATEMENT
(b) _____ INDEPENDENT ACCOUNTANT'S UNAUDITED STATEMENT
(c) _____ STATEMENT PREPARED BY ACCOUNTANT

5. THE APPLICANT FOR AN **UNLIMITED** LICENSE IS REQUIRED TO PROVIDE SATISFACTORY VERIFICATION OF ITS/HIS ABILITY TO FURNISH **PERFORMANCE BONDS** FOR ELECTRICAL CONTRACTING PROJECTS HAVING A VALUE **IN EXCESS OF \$130,000.00**. SUBJECT TO YOUR NORMALLY EXPECTED INDIVIDUAL JOB UNDERWRITING PROCEDURES AND YOUR RIGHT NOT TO EXCEED THIS APPLICANT'S LINE OF BONDING CREDIT, DOES YOUR COMPANY FEEL THAT THIS APPLICANT WOULD BE ELIGIBLE ON THIS DATE FOR A BOND **IN EXCESS OF \$130,000.00**? (NOTE: THIS IS STRICTLY A BONDING ABILITY STATEMENT AS OF THE DATE SHOWN ABOVE AND IN NO WAY COMMITS YOUR COMPANY TO THE ISSUANCE OF A BOND OF ANY TYPE TO THIS APPLICANT.) YES NO

6. IS YOUR COMPANY DULY LICENSED TO TRANSACT BUSINESS IN THE STATE OF NORTH CAROLINA AND IN GOOD STANDING WITH THE NORTH CAROLINA DEPARTMENT OF INSURANCE? YES NO

THIS STATEMENT MUST BE SIGNED UNDER THE NAME OF THE BONDING COMPANY AND MUST BE SIGNED BY EITHER A COMPANY REPRESENTATIVE OR BY A DULY LICENSED AGENT OF THE COMPANY, AND THE COMPANY REPRESENTATIVE OR THE AGENT MUST **ATTACH POWER OF ATTORNEY** AUTHORIZING HIM/HER TO SIGN FOR THE BONDING COMPANY, **DATED THE SAME DATE AS SHOWN AT THE TOP OF THIS STATEMENT OF BONDING ABILITY**.

NAME OF BONDING COMPANY: _____

BY: _____ (SEAL)
Bonding Company Official

BOND AGENT/ATTORNEY IN FACT: _____

BONDING COMPANY ADDRESS WHERE COMPANY OFFICIAL IS LOCATED: _____

NAME OF INSURANCE AGENCY: _____

ADDRESS: _____

UNLIMITED

MILITARY PERSONNEL/MILITARY SPOUSE

**SIGNED ORIGINAL MUST BE SUBMITTED TO THIS BOARD
PHOTOCOPY OR FAX COPY WILL NOT BE ACCEPTED**

CHARACTER FORM

TO: APPLICANTS FOR NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE PURSUANT TO NCGS 93B-15.1 (a) ESTABLISHING LICENSURE BY ENDORSEMENT FOR ELIGIBLE MILITARY PERSONNEL AND MILITARY SPOUSES

Please have this form completed by the employer, an employer representative or any other responsible person who has knowledge of the qualified individual's good character, and return it with your license application.

NOTE: **The qualified individual is not permitted to attest to his own good character.**

This is to certify that I have known _____ for approximately _____ years and that in my opinion he is of good character.

This _____ day of _____, _____.

SIGNED BY: _____

TITLE: _____

NAME OF FIRM: _____

ADDRESS: _____

PHONE: AREA CODE _____ / _____ - _____

MILITARY PERSONNEL/MILITARY SPOUSE

**SIGNED ORIGINAL MUST BE SUBMITTED TO THIS BOARD
PHOTOCOPY OR FAX COPY WILL NOT BE ACCEPTED**

CHARACTER FORM

TO: APPLICANTS FOR NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE PURSUANT TO NCGS 93B-15.1 (a) ESTABLISHING LICENSURE BY ENDORSEMENT FOR ELIGIBLE MILITARY PERSONNEL AND MILITARY SPOUSES

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This is to certify that I have known _____ for approximately _____ years and that in my opinion he is of good character.

This _____ day of _____, _____.

SIGNED BY: _____

TITLE: _____

NAME OF FIRM: _____

ADDRESS: _____

PHONE: AREA CODE _____ / _____ - _____

MILITARY PERSONNEL/MILITARY SPOUSE

**SIGNED ORIGINAL MUST BE SUBMITTED TO THIS BOARD
PHOTO-COPY OR FAX COPY WILL NOT BE ACCEPTED**

SUPERVISE AND DIRECT FORM

TO: APPLICANTS FOR NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE PURSUANT TO NCGS 93B-15.1 (a) ESTABLISHING LICENSURE BY ENDORSEMENT FOR ELIGIBLE MILITARY PERSONNEL AND MILITARY SPOUSES

Please have this form completed by the employer, an employer representative or any other responsible person who has knowledge of the qualified individual's ability, and return it with your license application.

NOTE: The qualified individual is not permitted to attest to his own ability.

This is to certify that I have known _____ for approximately _____ years; that I am knowledgeable of his electrical experience; and that in my opinion he does have the ability to satisfactorily **supervise and direct** all electrical wiring or electrical installation work done by an electrical contracting business in the **UNLIMITED** classification.

This _____ day of _____, _____.

SIGNED BY: _____

TITLE: _____

NAME OF FIRM: _____

ADDRESS: _____

TELEPHONE #: _____ / _____ - _____

MILITARY PERSONNEL/MILITARY SPOUSE

**SIGNED ORIGINAL MUST BE SUBMITTED TO THIS BOARD
PHOTO-COPY OR FAX COPY WILL NOT BE ACCEPTED**

SUPERVISE AND DIRECT FORM

TO: APPLICANTS FOR NORTH CAROLINA ELECTRICAL CONTRACTING LICENSE
PURSUANT TO NCGS 93B-15.1 (a) ESTABLISHING LICENSURE BY
ENDORSEMENT FOR ELIGIBLE MILITARY PERSONNEL AND MILITARY
SPOUSES

Please have this form completed by the employer, an employer representative or any other responsible person who has knowledge of the qualified individual's ability, and return it with your license application.

NOTE: The qualified individual is not permitted to attest to his own ability.

This is to certify that I have known _____
for approximately _____ years; that I am knowledgeable of his electrical experience;
and that in my opinion he does have the ability to satisfactorily **supervise and direct** all
electrical wiring or electrical installation work done by an electrical contracting business in the
UNLIMITED classification.

This _____ day of _____, _____.

SIGNED BY: _____

TITLE: _____

NAME OF FIRM: _____

ADDRESS: _____

TELEPHONE#: _____ / _____ - _____

MILITARY PERSONNEL/MILITARY SPOUSE