#### NORTH CAROLINA STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS



505 N. Greenfield Pkwy, Suite 100, Garner, NC 27529
Phone: (919) 733-9042 Fax: (800) 691-8399 Email: office@ncbeec.org Web: www.ncbeec.org

## **APPLICATION FOR EXAMINATION REVIEW**

### \$25.00 EXAMINATION REVIEW FEE

Examination reviews are held in group sessions at the Board's office. Board staff are present at all review sessions and will be available to answer any questions you may have. You will be provided a copy of your missed test questions and your answers. You will have approximately 4-hours to review your exam.

**NOTE:** You will be emailed and mailed a copy of your receipt and review notice once your review form has been processed. Your review notice will contain the details of your scheduled exam review.

#### Send completed form to:

Mail: NCBEEC, 505 N. Greenfield Pkwy,

Email: Office@ncbeec.org

Fax: (800) 691-8399

Full Name:	ıll Name:			Last 4 SSN:		
Mailing Address:				C: /5: /7:		
	Street Address					
EXAMINATION INFOR	<u>MATION</u>					
Exam Date:						
Exam to be Reviewed:	(check applicable cla	ssification)				
Limited	☐ Intermediat	е	Unlimited	SP-FA/LV	SP-SFD	
SP-PH	SP-EL	SP-SP	SP- ES	SP-WP		
PAYMENT INFORMAT	<u>ION</u>					
Method of Payment:	СНЕСК	□м	ONEY ORDER [	CREDIT CARD		
CARD #:	EXP. DATE: SECURITY CODE: _			TY CODE:		

# PLEASE ALLOW 7 – 10 BUSINESS DAYS FOR PROCESSING A COPY OF YOUR RECEIPT WILL BE SENT TO YOU AS CONFIRMATION OF YOUR REGISTRATION

Please make checks payable to: "State Board of Examiners of Electrical Contractors" or "NCBEEC".

(DO NOT WRITE BELOW THIS LINE – FOR BOARD USE ONLY)							
BY:	_ DATE:	_ AMOUNT:	_ B#:	_ REVIEW DATE:			