

APPLICATION TO ADD/DROP QUALIFIED INDIVIDUAL



STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS
3101 INDUSTRIAL DRIVE, SUITE 206, RALEIGH, NC 27609
TELEPHONE: 919-733-9042 FAX: 800-691-8399

- 1. CURRENT LICENSE NUMBER:
2. BUSINESS/FIRM NAME:
3. NAME, SIGNATURE AND SOCIAL SECURITY NUMBER PLEASE PROVIDE THE NAME, SIGNATURE, SOCIAL SECURITY NUMBER, AND DATE OF EMPLOYMENT FOR EACH QUALIFIED INDIVIDUAL TO BE ADDED TO LICENSE:

Blank lines for providing names, signatures, and social security numbers for qualified individuals.

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

Blank line for providing names, social security numbers, and dates of termination for individuals to be removed.

- 5. I CERTIFY THAT I HAVE READ THE PUBLIC NOTICE STATEMENT INCLUDED WITH MY APPLICATION AND THAT I UNDERSTAND IT.

- Checkboxes for: I HAVE NOT BEEN INVESTIGATED FOR EMPLOYEE MISCLASSIFICATION. I HAVE BEEN INVESTIGATED FOR EMPLOYEE MISCLASSIFICATION AND WILL SUPPLY THE RESULTS OF THE INVESTIGATION TO THE BOARD WITHIN 30 DAYS.

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

- 7. 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.

- 8. 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 (Owner, Partner, Officer, or Member)

TITLE

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

LICENSE # NASCLA SCREENED APPROVED BY EFFECTIVE DATE