EXAMINATION APPLICATION CHECKLIST

Use the following check list to complete your Exam Application. Ensure all applicable documents listed are submitted together at one time.

- **Employer Statement Form** (forms enclosed) verifying experience hours required for the classification chosen as defined in Rule .0202 of Title 21 NCAC18B (attached).

- **2 Character Statement Forms** (forms enclosed) from at least two persons who are knowledgeable of and can attest to the applicants’ good character.

- (Unlimited Classification Applicants ONLY) **2 Supervise & Direct Statement Forms** (forms enclosed) from at least two persons who are knowledgeable of and can attest to the applicants’ ability to supervise and direct all electrical work.

- **Exam Fee of $125.00.** Payment may be made by Check, Money Order or Credit Card. Make checks payable to NCBEEC.

*If you have any questions or need assistance with your application documents, contact our office at (919) 733-9042.*

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**NOTICE OF PROCESSING FEE FOR SUBMITTAL OF BAD CHECK**

Pursuant to Rule .0107 of Title 21, Chapter 18B, of the North Carolina Administrative Code, any person, partnership, firm, or corporation submitting a check to the Board that is subsequently returned because of insufficient funds or no account at a bank will be charged a processing fee of $25.00 for such a check; and, until the payer has made the check good and paid the $25.00 processing fee, the payer will not be eligible to take an examination, review an examination, obtain a license or have a license, renewed. Payment for making good such bad check and for the $25.00 processing fee must be in the form of a cashier’s check or money order payable to the “NCBEEC”.

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**CRIMINAL BACKGROUND AND HISTORY NOTICE**

Pursuant to Session Law 2019-91, all licensing boards must to include a reference to the appeal process in any orders denying licensure based on criminal convictions. The Board may conduct a formal criminal or disciplinary history check. Answering “yes” to any of these questions or having a conviction, disciplinary or adverse employment action is not automatically a basis for denial of licensure.

When an applicant has a criminal conviction, the Board will consider:

1. The level and seriousness of the crime.
2. The date of the crime.
3. The age of the person at the time of the crime.
4. The circumstances surrounding the commission of the crime, if known.
5. The nexus between the criminal conduct and the prospective duties of the applicant as a licensee.
6. The prison, jail, probation, parole, rehabilitation, and employment records of the applicant since the date the crime was committed.
   a. The completion of, or active participation in, rehabilitative drug or alcohol treatment.
7. The subsequent commission of a crime by the applicant.
8. Any affidavits or other written documents, including character references.

If Board staff is unable to approve an application, the applicant has the right to request to have that application heard by the members of the Board. Any such request should be submitted in writing to the Board’s Executive Director. The Board will conduct that hearing pursuant to the North Carolina Administrative Procedure Act and the Board’s own hearing rules. As a result of the evidence presented at that hearing and considering the considerations outlined above, the Board may refuse to grant or may condition a license if it finds any of the grounds for doing so under North Carolina Gen. Stat. § 90-85.38(a).

If the applicant wishes to appeal the Board’s final decision, the applicant may seek review of the decision by filing a petition for judicial review in the Superior Court pursuant to Article 4 of the Administrative Procedure Act, North Carolina Gen. Stat. § 150B-43 et seq.
.0201 REQUIREMENTS FOR ALL EXAMINATION APPLICANTS

(a) To take an examination in any electrical contracting license classification, the applicant must:

1) be at least 18 years of age;
2) submit the required duly filed application as defined in Rule .0210;
3) submit with the application written statements from at least two persons attesting to the applicant’s good character; and
4) meet any other requirements set out in Paragraph (b) of this Rule.

(b) Examination applicants must meet the following requirements for the specified license classifications:

1) **Limited classification.** An applicant must have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both.

2) **Intermediate classification.** An applicant must have at least 5,750 hours of experience, as defined in Rule .0202 of this Section, of which at least 5,000 hours shall be primary experience. The balance of experience may be primary, secondary or both.

3) **Unlimited classification.** An applicant must:
   A) have at least 9,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 8,000 hours shall be primary experience. The balance of experience may be primary, secondary or both, and
   B) submit with the application written statements from at least two persons, who are knowledgeable of the applicant’s electrical experience, attesting to the applicant’s ability to supervise and direct all electrical wiring or electrical installation work done by an electrical contracting business in the unlimited classification.

4) **Single family detached residential dwelling (SP-SFD) classification.** An applicant must have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both.

5) **Special restricted fire alarm/low voltage (FALV) classification.** An applicant must have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience for service in any of the capacities listed in Rule .0202 that the applicant gained in the low voltage field.

6) **Special restricted elevator (SP-EL) classification.** An applicant must:
   A) have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience for service in any of the capacities listed in Rule .0202 that the applicant gained in the elevator field, and
   B) include on the application information verifying that the applicant is primarily engaged in or is regularly employed by and will be the listed qualified individual, for a firm that is primarily engaged in, a lawful elevator business in this State.

7) **Special restricted plumbing and heating (SP-PH) classification.** An applicant must:
   A) have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience for service in any of the capacities listed in Rule .0202 that the applicant gained in the plumbing, heating, or air conditioning field, and
   B) include on the application information verifying that the applicant is primarily engaged in or is regularly employed by and will be the listed qualified individual, for a firm that is primarily engaged in, a lawful plumbing, heating, or air conditioning business in this State.

8) **Special restricted ground water pump (SP-WP) classification.** An applicant must:
   A) have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience for service in any of the capacities listed in Rule .0202 that the applicant gained in the ground water pump field, and
   B) include on the application information verifying that the applicant is primarily engaged in or is regularly employed by and will be the listed qualified individual for a firm that is primarily engaged in, a lawful ground water pump business in this State.

9) **Special restricted electric sign (SP-ES) classification.** An applicant must:
   A) have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience in any of the capacities listed in Rule .0202 that the applicant gained in the electric sign field, and
   B) include on the application information verifying that the applicant is primarily engaged in or is regularly employed by and will be the listed qualified individual for a firm that is primarily engaged in, a lawful electric sign business in this State.

10) **Special restricted swimming pool (SP-SP) classification.** An applicant must:
    A) have at least 3,000 hours of experience, as defined in Rule .0202 of this Section, of which at least 2,000 hours shall be primary experience. The balance of experience may be primary, secondary or both. An applicant in this classification may also receive creditable experience for service in any of the capacities listed in Rule .0202 that the applicant gained in the swimming pool field, and
    B) include on the application information verifying that the applicant is primarily engaged in or is regularly employed by and will be the listed qualified individual for a firm that is primarily engaged in, a lawful swimming pool business in this State.

History Note: Authority G.S. 87-42; 87-43.3; 87-43.4; 87-44; Eff. October 1, 1988. Amended Eff. October 1, 2022; October 1, 2017; January 1, 2010; March 1, 1999; February 1, 1990.
APPLICATION FOR EXAMINATION

SUBMIT DOCUMENTS TO:
Mail: NCBEEC, 505 N. Greenfield Pkwy, Suite 100, Garner, NC 27529
Email: Office@ncbeec.org
Fax: (800) 691-8399

EXAMINATION FEE: $125.00 (ALL CLASSIFICATIONS; INCLUDES APPLICATION AND EXAMINATION. APPLICATION FEE IS NON-REFUNDABLE.)

1. CLASSIFICATION OF EXAMINATION (CHECK ONE CLASSIFICATION):
   - LIMITED
   - INTERMEDIATE
   - UNLIMITED
   - SP-SFD
   - SP-FA/LV
   - SP-PH
   - SP-EL
   - SP-WP
   - SP-ES
   - SP-SP

2. NAME ___________________________________________________________ SOCIAL SECURITY # ____________________________
   (FIRST) (MIDDLE) (LAST)
   ADDRESS ____________________________________________________________ ZIP CODE _______ COUNTY ____________
   (STREET OR P.O. BOX) (CITY) (STATE)
   PHONE __________________________ EMAIL __________________________ DATE OF BIRTH __________________
   (AREA CODE)

3. HAVE YOU EVER BEEN APPROVED TO TAKE AN EXAMINATION CONDUCTED BY THIS BOARD FOR AN ELECTRICAL CONTRACTING LICENSE?
   WHICH CLASSIFICATION? __________________________________________

4. PRESENT EMPLOYER COMPANY NAME _______________________________
   (LIST UNEMPLOYED OR N/A IF NO EMPLOYER)
   EMPLOYER MAILING ADDRESS __________________________________________
   (STREET OR P.O. BOX) (CITY) (STATE) (ZIP CODE)
   EMPLOYER PHONE __________________ CURRENT POSITION __________________ HIRE DATE __________
   (AREA CODE)

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

5. A. HAVE YOU BEEN CONVICTED OF A MISDEMEANOR IN THE PAST 3 YEARS? (EXCLUDING MINOR TRAFFIC VIOLATIONS) □ YES □ NO
   B. HAVE YOU EVER BEEN CONVICTED OF A FELONY? □ YES □ NO
   If yes to either, explain on reverse side of this form and provide a complete copy of the court judgment. If a copy of the court judgment was previously submitted, initial here and do not re-submit. __________

6. METHOD OF PAYMENT □ CHECK/MONEY ORDER (PAYABLE TO NCBEEC) □ CREDIT CARD
   CARD NUMBER ________________________________ EXPIRATION DATE __________ SECURITY CODE __________
   CARD NAME ___________________________ BILLING ADDRESS __________________ ZIP ________

___ BY SIGNING THE APPLICANT AUTHORIZES THE BOARD TO RESEARCH AND VERIFY THE INFORMATION SUBMITTED CONCERNING THIS APPLICATION.

SIGNATURE OF APPLICANT ___________________________ DATE __________

(FOR BOARD USE ONLY)
APPROVED BY ___________________________ DATE ___________ FEE __________ BATCH __________
EXPERIENCE _____________ S&D __________ CHARACTER __________ BACKGROUND ___________
.0202 EXPERIENCE

(a) Primary. As used in this Chapter, primary experience means working experience gained by the applicant while engaged directly in the installation of electrical wiring and equipment governed by the National Electrical Code or work activities directly related thereto. Examples of the type of work or training in which a person may engage to gain creditable secondary experience and the percentages for creditable primary experience are as follows:

<table>
<thead>
<tr>
<th>PRIMARY CAPACITY EXAMPLES</th>
<th>% OF HOURS ACCEPTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Journeyman electrician or electrician mechanic, both meaning the same;</td>
<td>100</td>
</tr>
<tr>
<td>2) Electrical foreman;</td>
<td>100</td>
</tr>
<tr>
<td>3) Electrical general foreman;</td>
<td>100</td>
</tr>
<tr>
<td>4) Electrical superintendent;</td>
<td>100</td>
</tr>
<tr>
<td>5) Electrical general superintendent;</td>
<td>100</td>
</tr>
<tr>
<td>6) Estimator for licensed electrical contractor;</td>
<td>100</td>
</tr>
<tr>
<td>7) Electrical inspector recognized as such by the State Department of Insurance;</td>
<td>100</td>
</tr>
<tr>
<td>8) Time spent by a professional engineer who is responsible for follow-up project supervision, beyond the point of delivery, in electrical engineering, design consulting;</td>
<td>100</td>
</tr>
<tr>
<td>9) Full-time instructor teaching National Electrical Code, NFPA 72 and related electrical courses at a college, university, community college, technical institute, high school or vocational school;</td>
<td>80</td>
</tr>
<tr>
<td>10) Maintenance journeyman electrician or electrician mechanic employed in a full-time electrical maintenance department;</td>
<td>100</td>
</tr>
<tr>
<td>11) Time actually spent in electrical maintenance by a maintenance journeyman electrician or electrician mechanic regularly employed in other than a full-time electrical maintenance department;</td>
<td>100</td>
</tr>
<tr>
<td>12) Military person holding an electrician rating or rank of at least E-4 who is engaged in land-based electrical installations similar or equivalent to work performed by an electrical contractor;</td>
<td>100</td>
</tr>
<tr>
<td>13) Time actually spent in part-time or incidental work in any primary experience category;</td>
<td>100</td>
</tr>
<tr>
<td>14) Time actually spent installing or maintaining fire alarm/low voltage systems;</td>
<td>100</td>
</tr>
<tr>
<td>15) Time as a holder of NICET certification on NFPA 72 Level I, II, III or IV applicable to Fire Alarm and Low Voltage only;</td>
<td>100</td>
</tr>
</tbody>
</table>

In calculating accumulative primary experience, a total of 2,000 hours shall equal one full-time creditable year. The total number of creditable years shall be calculated by dividing the total hours of primary experience by 2,000. Example: Applicant has worked in primary capacity for a total of 7,200 hours of primary experience, 7,200 / 2,000 = 3.6 years creditable primary work experience.

(b) Secondary. As used in this Chapter, secondary experience means working experience gained while engaged in work or training that is related to the installation of electrical wiring and equipment governed by the National Electrical Code. Examples of the type of work or training in which a person may engage to gain creditable secondary experience and the percentages for creditable secondary experience are as follows:

<table>
<thead>
<tr>
<th>SECONDARY CAPACITY EXAMPLES</th>
<th>% OF HOURS ACCEPTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Apprentice electrician training in an apprentice program approved by the NC Community College System;</td>
<td>100</td>
</tr>
<tr>
<td>2) Time spent as an apprentice electrician or helper other than as described in subparagraphs (1) and (3) of this paragraph;</td>
<td>80</td>
</tr>
<tr>
<td>3) Time actually spent in electrical maintenance by a maintenance apprentice or electrician helper regularly employed in other than a full-time electrical maintenance department;</td>
<td>80</td>
</tr>
<tr>
<td>4) Student satisfactorily completing National Electrical Code and related electrical courses at a college, university, community college, technical institute, high school, or vocational school;</td>
<td>50</td>
</tr>
<tr>
<td>5) Time spent by a professional engineer who is not responsible for follow-up project supervision, beyond the point of delivery, in electrical engineering, design, or consulting;</td>
<td>50</td>
</tr>
<tr>
<td>6) Electrical construction design under the supervision of a professional engineer;</td>
<td>50</td>
</tr>
<tr>
<td>7) Sales representative for an electrical wholesaler, distributor, or manufacturer;</td>
<td>20</td>
</tr>
<tr>
<td>8) Appliance service and repair;</td>
<td>20</td>
</tr>
<tr>
<td>9) Electric utility lineman; and</td>
<td>10</td>
</tr>
<tr>
<td>10) Electric utility serviceman;</td>
<td>20</td>
</tr>
</tbody>
</table>

In calculating accumulative secondary experience, a total of 2,000 hours shall equal one full-time creditable year. The total number of creditable years shall be calculated by applying the percentage for creditable secondary experience and dividing the remainder hours by 2,000. Example: Applicant has 1,000 hours of work experience as a helper or regular apprentice and 2,200 hours of experience while enrolled in an approved apprentice training program: 1,000 hours at 80 percent = 800 hours secondary experience; 2,200 hours at 100 percent = 2,200 hours secondary experience; 800 + 2,200 / 2,000 = 1.5 years creditable secondary experience.

(c) Other Experience. The Board shall approve other experience that it finds to be equivalent or similar to the primary or secondary experience defined in this Rule.

History Note: Authority G.S. 87-42; 87-43.3; 87-43.4; Eff. October 1, 1988. Amended Eff. October 1, 2017; January 1, 2010; March 1, 1999.
EMPLOYER STATEMENT FORM

ELECTRICAL EXPERIENCE SHOULD BE STATED ON THIS FORM. This form is to be completed the applicants past or present employer or employer representative under whom their electrical experience was gained. Refer to Board rule .0202 Experience” when completing this form. The Board reserves the right to contact the Employer/Employer Representative and review all employment records in making a final determination of an applicant’s experience.

This document must be submitted with your Examination Application. Separate forms should be used for each employer. Altered forms will not be accepted. Applicants cannot verify their own experience.

Job titles / full-time / etc. listed as a capacity below WILL NOT BE ACCEPTED. Acceptable experience capacities are in rule .0202 “Experience”.

This is to certify that __________________________________ is/was employed by this firm in the following capacity/capacities and gained the stated experience while working in said capacity:

A) SECONDARY EXPERIENCE: Working experience gained while engaged in work or training that is related to the installation of electrical wiring and equipment governed by the National Electrical Code or work activities directly related thereto. (Examples: Helper or Apprentice. Enter dates of employment, capacity held and total hours of experience gained while in that capacity.)

BEGIN DATE OF EXPERIENCE: ______________ END DATE OF EXPERIENCE: ______________
CAPACITY: __________________________________ TOTAL HOURS EXPERIENCE: _______________________

B) PRIMARY EXPERIENCE: Working experience gained by the applicant while engaged directly in the installation of electrical wiring and equipment governed by the National Electrical Code or work activities directly related thereto. (Examples: Journeyman or Electrician Mechanic. Enter time period experience was gained, capacity held and total hours of experience.)

BEGIN DATE OF EXPERIENCE: ______________ END DATE OF EXPERIENCE: ______________
CAPACITY: __________________________________ TOTAL HOURS EXPERIENCE: _______________________

C) OTHER EXPERIENCE: (Enter dates of employment, capacity held and total hours of experience gained while in that capacity.)

BEGIN DATE OF EXPERIENCE: ______________ END DATE OF EXPERIENCE: ______________
CAPACITY: __________________________________ TOTAL HOURS EXPERIENCE: _______________________

Please check one of the following that best describes this applicant’s character: □ GOOD □ NOT GOOD □ NO OPINION

Other Comments:________________________________________________________________________

Employer Company Name:_________________________________________________________________

Employer Address:_______________________________________________________________________
(STREET / P.O. BOX) (CITY) (STATE) (ZIP CODE)

Phone:________________________________________ Email Address:_____________________________

Employer/Representative Signature:_____________________________________________ Title:_____________________

Employer/Representative Printed Name:_________________________ Date Signed:____________________

STATE OF __________________________________ COUNTY OF __________________________

I, a notary public of the aforesaid state and county, certify that the employer/representative whose signature appears above, personally appeared before me, and signed the foregoing document.

Witness my hand and official seal, this __________ day of __________________________, __________. (SEAL)

Notary Printed Name_________________________________________ Notary Signature____________________________

My Commission Expires ______________________________________

(BOARD USE ONLY)

APPROVED BY:_________________ DATE:_________________
CHARACTER STATEMENT FORM

THIS FORM REFERS TO THE APPLICANTS CHARACTER. TWO (2) WRITTEN STATEMENTS FROM AT LEAST TWO (2) INDIVIDUALS ATTESTING TO THE APPLICANT’S GOOD CHARACTER ARE REQUIRED. EXAMPLES OF ACCEPTABLE CHARACTER WITNESSES INCLUDE BUT ARE NOT LIMITED TO: CO-WORKERS, EMPLOYERS, PROFESSIONAL ASSOCIATES, ETC.

This is to certify that I have known ____________________________ for approximately ___________ years and that in my opinion, they are of good character.

Signed this _______________ day of ____________________________, ____________.

WITNESS SIGNATURE: ____________________________________________

PRINTED NAME: ________________________________________________

TITLE: __________________________________________________________

COMPANY: ______________________________________________________

ADDRESS: ______________________________________________________

(STREET / P.O. BOX)

(CITY / STATE / ZIP CODE)

PHONE: _________________________________________________________

(AREA CODE)

EMAIL: _________________________________________________________

(BOARD USE ONLY)

APPROVED BY:______________ DATE:__________________
CHARACTER STATEMENT FORM

THIS FORM REFERS TO THE APPLICANT'S CHARACTER. TWO (2) WRITTEN STATEMENTS FROM AT LEAST TWO (2) INDIVIDUALS ATTESTING TO THE APPLICANT'S GOOD CHARACTER ARE REQUIRED. EXAMPLES OF ACCEPTABLE CHARACTER WITNESSES INCLUDE BUT ARE NOT LIMITED TO: CO-WORKERS, EMPLOYERS, PROFESSIONAL ASSOCIATES, ETC.

This is to certify that I have known ____________________________ for approximately ______________ years and that in my opinion, they are of good character.

Signed this ______________ day of ____________________________, ______________.

WITNESS SIGNATURE: ________________________________

PRINTED NAME: ________________________________

TITLE: ________________________________

COMPANY: ________________________________

ADDRESS: ____________________________________________

(STREET / P.O. BOX)

____________________________________________________

(CITY / STATE / ZIP CODE)

PHONE: ____________________________________________

(AREA CODE)

EMAIL: ____________________________________________

(BOARD USE ONLY)

APPROVED BY: ______________ DATE: ______________
SUPERVISE & DIRECT STATEMENT FORM

REQUIRED FOR THE UNLIMITED CLASSIFICATION ONLY.

THIS FORM REFERS TO THE APPLICANT’S SUPERVISING ABILITIES. TWO (2) WRITTEN STATEMENTS FROM AT LEAST TWO (2) PERSONS WHO ARE KNOWLEDGABLE OF THE APPLICANT’S ABILITY TO SUPERVISE AND DIRECT ALL ELECTRICAL WIRING AND ELECTRICAL INSTALLATION WORK DONE BY AN ELECTRICAL CONTRACTING BUSINESS ARE REQUIRED.

THIS FORM MAY ALSO BE USED FOR CHARACTER REFERENCE. EXAMPLES OF ACCEPTABLE WITNESSES INCLUDE BUT ARE NOT LIMITED TO: CO-WORKERS, EMPLOYERS, PROFESSIONAL ASSOCIATES, ETC.

This is to certify that I have known ____________________________ for approximately ____ years; that I am knowledgeable of their electrical experience; and that in my opinion they have the ability to satisfactorily supervise and direct all electrical wiring and electrical installation work performed by an electrical contracting business in the Unlimited classification.

Please check one of the following that best describes your opinion of the applicant’s character:

☐ GOOD  ☐ NOT GOOD  ☐ NO OPINION

Signed this _____________ day of ____________________________, ____________.

WITNESS SIGNATURE: ________________________________

PRINTED NAME: ____________________________________________

TITLE: _____________________________________________________

COMPANY: ________________________________________________

ADDRESS: ________________________________________________

(STREET / P.O. BOX)

________________________________________________________

(CITY / STATE / ZIP CODE)

PHONE: __________________________________________________

(AREA CODE)

EMAIL: ___________________________________________________

(BOARD USE ONLY)

APPROVED BY: __________________ DATE: ________________
SUPERVISE & DIRECT STATEMENT FORM

REQUIRED FOR THE UNLIMITED CLASSIFICATION ONLY.

THIS FORM REFERS TO THE APPLICANT’S SUPERVISORY ABILITIES. TWO (2) WRITTEN STATEMENTS FROM AT LEAST TWO (2) PERSONS WHO ARE KNOWLEDGABLE OF THE APPLICANT’S ABILITY TO SUPERVISE AND DIRECT ALL ELECTRICAL WIRING AND ELECTRICAL INSTALLATION WORK DONE BY AN ELECTRICAL CONTRACTING BUSINESS ARE REQUIRED.

THIS FORM MAY ALSO BE USED FOR CHARACTER REFERENCE. EXAMPLES OF ACCEPTABLE WITNESSES INCLUDE BUT ARE NOT LIMITED TO: CO-WORKERS, EMPLOYERS, PROFESSIONAL ASSOCIATES, ETC.

This is to certify that I have known ______________________ for approximately ____ years; that I am knowledgeable of their electrical experience; and that in my opinion they have the ability to satisfactorily supervise and direct all electrical wiring and electrical installation work performed by an electrical contracting business in the Unlimited classification.

Please check one of the following that best describes your opinion of the applicant’s character:

☐ GOOD    ☐ NOT GOOD    ☐ NO OPINION

Signed this _______________ day of _____________________________, ______________.

WITNESS SIGNATURE: ________________________________

PRINTED NAME: ________________________________

TITLE: ________________________________

COMPANY: ________________________________

ADDRESS: __________________________________________

(STREET / P.O. BOX)

________________________________________

(CITY / STATE / ZIP CODE)

PHONE: ______________________________________

(AREA CODE)

EMAIL: ______________________________________

(BOARD USE ONLY)

APPROVED BY: _______________ DATE: _______________