

#### State of Alabama

### The Alabama Board of Electrical Contractors

2777 Zelda Road Montgomery, AL 36106

# ELECTRICAL CONTRACTOR APPLICATION BY EXAMINATION OR RECIPROCITY AGREEMENT

### INFORMATION AND INSTRUCTIONS

### **Application by Examination:**

Applications for the examination are reviewed at the Board's quarterly meetings. Applications are to be submitted to the Board Office on or before the deadline (see meeting schedule). Applications received after the deadline will remain in the Board office until the next quarterly meeting.

You will be notified within 10 days after being approved and at that time, you need to submit an exam fee of \$165 (Cashier's check or money order). Once this fee is paid, you will receive an authorization letter with instructions to schedule the examination. A Candidate Information Bulletin (for all testing information) is located on the Board's website under the forms section. All scores are reported by mail. If you do not pass, you will receive a form to retake the examination. Do not submit your application in a quarter that you will not be prepared to take the examination. Authorization letters are not transferable to another person. You will be required to submit a re-take form (available on the website) along with an additional examination fee if you fail to take your examination within the authorized 90 days. If you fail the exam you can submit a re-take, a new 90 days will be authorized.

**Application Instructions:** This application may be typed or neatly hand written. For your application to be reviewed by the Board, it must be complete and all the following information included:

- Appropriate licensing category is marked (by Exam or Reciprocity)
- Required and notarized signatures have been obtained
- o Passport photo (2x2) is included
- Work experience and work affidavit sections have been completed
- All questions answered

Required Experience: The required experience to qualify for this examination is in commercial, industrial or residential. You must have held a supervisory or managerial position for the required amount of time. Maintenance experience of any type will not be counted towards the required amount of time. The Work Affidavit must be completed by someone in the Human Resources Department, Company President/CEO, Electrical Contractor, Master Electrician, Electrical Engineer or Electrical Inspector. You cannot sign your own work affidavit. If you are self-employed,

sign the Affidavit of Applicant / Owner President on page 4 on both lines – as the Applicant and as the Owner/President.

The application must have a minimum 8,000 hours of electrical supervisory experience. As defined in Chapter 303-X-2-.02(b)(1): "Persons applying for a statewide electrical contractor examination must demonstrate a minimum of 8,000 hours' experience that shows that you have designed, planned, laid-out and directly supervised electrical construction activities and the installing of electrical components."

**Qualified Education:** Applicant may substitute one year of education in electrical curriculum for one-half year electrical experience for a maximum of 2,000 hours of the required 8,000 hours of experience. The applicant must submit a copy of the diploma, certificate, or transcript.

### **Applicants Applying by Reciprocity Agreement:**

All reciprocal applicants must meet the experience requirements listed above. An applicant also must have passed a standardized examination with one of these participating states: Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee or Virginia. The applicant must not have any outstanding complaints with any other licensing agency, and all applicants must be currently licensed and in good standing.

**Application Instructions:** This application may be typed or neatly hand written. For your application to be reviewed by the Board, it must be complete and all the following information included:

- A copy of your license issued by the state licensing board showing you have an electrical contractor's license in the category in which you are applying.
- An original letter from the State Board (<u>letter must be sent with application not separately</u>) verifying that you hold an unlimited/unrestricted license and that you have passed the required examination. (copies, faxes and online verifications are not accepted).
- Work experience and work affidavit sections have been completed
- o The reciprocity fee of \$315.00 (Cashier's check or money order).
- o All questions answered

Note that State law requires that any electrical contractor performing a job over \$50,000 must have an appropriate license issued by the Alabama Licensing Board for General Contractors. For questions regarding this, contact the General Contractors Board at 1-800-356-6361 or <a href="https://www.genconbd.state.al.us.">www.genconbd.state.al.us.</a>



### State of Alabama **The Alabama Board of Electrical Contractors** 2777 Zelda Road

Montgomery, AL 36106

# **ELECTRICAL CONTRACTORS LICENSE APPLICATION**

	Application fo	In this space	
	Electrical Contractor by Examination		
	Electrical Contr	the last six months.	
Full Name:(L		(Fig. 4)	/A#: .1.11\
(L	ast)	(First)	(Middle)
Business Name:	ot name in which the	entity will be conduct	ing business in Al
IRS (tax) Identification # _	May substitute	e SSN#	_
Select your business type			
Sole proprietorship	Partnership	Corporation	LLCLLP
Business Mailing Address:			
Business Physical Address:	(City)	(State)	(Zip)
	(City)	(State)	(Zip)
Business Phone: ()		Fax: ()	
Preferred Email Address:			
Home Address:			
(Street)	(City)	(State)	(Zip)
SSN: Primary	Phone:()	Secondary Pho	one: ()

### **Background Information of Applicant**

Attach documents and/or a written explanation for each "Yes" answer. Have you ever been disciplined for contracting/practicing as an electrical contractor or without being properly licensed? YES NO Is any investigation or disciplinary action currently pending against you by any regulatory authority? YES NO Have you or any organization of which you are or were an officer, principal, qualifying party or major shareholder ever been issued a Cease and Desist Order for contracting / practicing without being proper licensed? YES NO **Affidavit of Applicant / Owner President:** I, the applicant, listed on this application, am a full-time employee in a responsible management position with the applicant requesting this license. I, the applicant, and I, the owner / president. affirm that all statements contained herein are true and correct to the best of our knowledge. We further understand that false or incorrect information provided by either of us may result in the cancellation or denial of license issued pursuant to this application and may be subject to civil and criminal proceedings. We agree that all information in this application may be verified and investigated. We have read, and are familiar with, the Alabama Code of Laws Act regulating contracting and hereby agree to abide by such laws. Signature of Applicant Title Date Title Signature of Owner / President Date Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ , 20 My Commission expires\_\_\_\_\_ Notary Public

Note: Must be signed and notarized or application will be returned.

State of \_\_\_\_\_ County of \_\_\_\_\_

# **Business Entity Job List**

List the jobs you supervised to demonstrate you have 8,000 hours of experience. If claiming education, list here and enclose proof (transcripts or diploma). If additional space is needed, copy this page and attach to application.

List dates as mm/yyyy	Name & brief description of job you supervised	Total project hours	City & state of job
Job start date:			
Job completion date:			
Job start date:			
Job completion date:			
Job start date:			
Job completion date:			
Job start date:			
Job completion date:			
Job start date:			
Job completion date:			
Job start date:			
Job completion date:			

### **Work Affidavit**

Applicant must furnish the Board a separate affidavit from each employer or company listed on this application, certifying the hours in electrical construction work. Applicant <u>cannot</u> certify his/her own electrical hours. <u>If applicant is self-employed, do not use this form. Sign twice under the Affidavit of Applicant/Owner President.</u>

If employed in more than one capacity, list each Supervisory Position / Title and the period applicable. Dates on work affidavit must match dates listed on the Business Entity Job List. A minimum of 8,000 hours must be certified.

On this	day of	20	_, I hereby c	ertify that	
	(Last Name)	(Fir	st Name)	(Middle Initia	al)
was emplo	yed by				
	Comp	pany Name			
				in the	capacity of:
Company A	Address, City, State, Zip Code				, ,
Supervisor	y Position/Title	from the		day of	
through the	eday of		,	·	
Total hours	s worked				
Supervisor	y Position/Title	from the		day of	
through the	eday of		,	·	
Total hours	s worked				
Total time v	worked				
certify tha	t the above statements are true a	and correct acc	ording to the	e company records and	or my personal knowled
This	day of	20			
11110	day or	20	Nai	me (PLEASE PRINT)	
	NOTARY		Sig	nature	
My Commis	sion Expires				
(Seal)			Cor	mpany	
			LIC	# or Title	
			( <u> </u>	one F	)ax
			Em	nail:	



### **Alabama Electrical Contractors Board**

### **Proof of Citizenship Form**

This form is to be completed by all applicants to comply with AL Code §31-13-7 (1975 as amended).

Please mail this form with a copy of the required documentation to:

### AL Electrical Contractors Board 2777 Zelda Rd. Montgomery, AL 36106

Do not send originals or faxes of citizenship/legal presence documents.

Name (Ple	ase Print):			
	lease complete this section if you are a United States Citizen. Check all that apply below:			
	ed States Citizen. I am submitting the attached COPY of my document to prove citizenship:			
	k and submit one of the following:			
0	Alabama Driver's License or identification issued by the Department of Public Safety			
0	Driver's License from other state that required proof of lawful presence			
0				
	O Valid U.S. Passport			
	O Military Identification showing U.S. as place of birth			
-	O Naturalization documents			
	O Certificate of Citizenship			
	O Consular report of birth abroad of US Citizen			
0	Bureau of Indian Affairs identification			
	O American Indian card issued by Homeland Security			
	O Final adoption decree showing person's name and place of U.S. Birth			
0	A valid Uniformed Services Privileges and identification card			
0	Excerpt from a United States hospital record of birth indicating the place of birth in the United States			
0	Certification of Birth issued by U.S. Department of State			
	clare that I am a citizen of the United States of America. <u>I sign this declaration under penalty of perjury</u> ; making a false or atement or representation in this declaration is perjury in the second degree, pursuant to Ala. Code S 13A10-102.			
Signature				
I am <b>not</b> a l	Please complete this section if you are not a United States Citizen. Check all that apply below:  Jnited States Citizen. I am submitting the attached COPY of my document to prove legal presence in the US:  k and submit one of the following:			

### O 1-327 Re-entry Permit

- O 1-551 Permanent Resident Card
- O 1-571 Refugee Travel Document
- O 1-766 Employment Authorization Card
- O 1-94 Arrival/Departure Record
- O Unexpired Foreign Passport
- O Temporary 1-551 Stamp (on passport or 1-94)
- O 1-20 Certificate of Eligibility for non-immigrant (F-1) student status
- O DS 2019 Certificate of Eligibility for Exchange Visitor (J-1) status
- O Machine-readable immigrant Visa (with temporary 1-551 language)
- O Other: Explain: \_\_\_\_\_

I hereby declare that I am an alien lawfully present in the United States of America. I sign this declaration under penalty of perjury; making a false or fictitious statement or representation in this declaration is perjury in the second degree, pursuant to Ala. Code S 13A-10-102.

FOR BOARD USE ONLY	
DATE APPLICATION REVIEWED:	
BOARD MEMBER:	
APPROVED FOR EXAMINATION: YES NO	
BOARD MEMBER'S INITIAL	
DISAPPROVED FOR EXAMINATION DUE TO:	
APPROVED / DENIED FOR RECIPROCITYYESNO	
STATE:	
EXECUTIVE SECRETARY	DATE:



#### State of Alabama

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If you would like to receive notification that your application has been received, submit this page with your application, along with a self-addressed stamped envelope.

This form should not be used by those applying for reciprocity.

in the applicant name and company below:
plicant:
mnany.
mpany:
amp:
amp.

**Applicant:** Your application has been received by the Alabama Electrical Contractors Board on the date stamped above.

You will need to refer to the Board's application deadline and meeting calendar to know when your application will be reviewed for approval to take the examination. If this letter is returned to you, the Board's staff has reviewed your application and considers it to be complete.

If the application is not considered to be complete by the Board's staff, you will receive your application along with written instructions on what is needed to complete the application.