KIM REYNOLDS, GOVERNOR

CHRIS COURNOYER, LT. GOVENOR

LARRY JOHNSON, JR., DIRECTOR

AFFIDAVIT OF WORK HOURS TO BE REQUIRED FOR SPONSORSHIP OF JOURNEYMAN EXAM (RESIDENTIAL ELECTRICIAN AND RESIDENTIAL MASTER ELECTRICIAN)

I <u>, </u>	of		
(Print Name of Licensee)	(Full addres	ss, Including City, State, Zip)	
currently hold a Residential Electrician lic	cense or Residential Maste	er Electrician license issued b	by the
Board; have completed 4,000 hours of w	ork on commercial or indu	strial electrical installations v	vhile
licensed by the Board and my hours can	be verified by a master el	ectrician licensed by the Boa	rd. The
4,000 hours of work included the following	ng minimum number of hou	urs in the categories indicated	d: 100
hours of preliminary work, 500 hours of r	ough-in work, 500 hours o	f finish work, 500 hours of lig	hting and
service work, 100 hours of troubleshooting	ng, and 100 hours of moto	r control work.	
I attest that the above information is true and or misleading information to the Electrical Electrician license per Iowa Code § 103.35.	-	•	•
Signature of Licensee	Current License #	 Date	_
I hereby verify that the licensee named abo sit for the Journeyman Exam. I realize that Board could be grounds for suspension or r	submitting false or mislead	ing information to the Electrica	l Examining
Signature of Iowa Master Electrician	Current License #	Date	_

6200 Park Ave, Ste 100 | Des Moines, IA 50321-1371 | 515.725-6147

2/28/25