

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED UNTIL **ALL** ITEMS HAVE BEEN SUBMITTED AS REQUIRED

The application must be completed and signed by the applicant. All information must be typed or clearly printed in black or blue ink. The application and all attachments must be submitted on separate pieces of single-sided, $8\frac{1}{2}$ " x 11" plain paper. Please use a paper-clip to fasten all pages together, with the check or money order on top. Do not use staples, and use only plain paper.

If one check will be used to pay for multiple applications, a Combined-Check Worksheet must be completed and submitted with the applications and payment. The Combined-Check Worksheet is available on the back page of the instructions, and on the State Fire Marshal's Website: http://www.dps.state.ia.us/fm/electrician/index.shtml.

MAKE CHECKS AND MONEY-ORDERS PAYABLE TO: IOWA ELECTRICAL EXAMINING BOARD

THE FOLLOWING MATRIX SHOULD BE USED TO DETERMINE WHICH PARTS OF THE APPLICATION ARE REQUIRED TO BE COMPLETED BASED ON THE TYPE OF LICENSE DESIRED.

Type of License	Part 1 Personal Information	Part 2 License Type	Part 3 Screening Questions	Part 4 Educational Records	Part 5 Current Electrical Licenses in Force	Part 6 Practical Electrical Work Experience & References	Part 7 Verifiable Electrical Work Experience	Part 8 Applicant Signature	Part 9 Electrical Contractor	Class B Affidavit/ Special Electrician Affidavit	Certificate of Responsible Licensed Master
Electrical Contractor	Х	Х	Х	Х	Х			Х	Х		Х
Residential Electrical Contractor	Х	Х	X	Х	Х			Х	Х		Х
Class A Master Electrician	Х	Х	Х	Х	Х	Х	Х	Х			
Class B Master Electrician	Х	Х	Х	Х	Х	Х	Х	Х		Х	
Residential Master Electrician	Х	Х	Х	Х	Х	Х	Х	Х			
Class A Journeyman Electrician	Х	Х	Х	Х	Х	Х	Х	Х			
Class B Journeyman Electrician	Х	Х	Х	Х	Х	Х	Х	Х		Х	
Residential Electrician	Х	Х	Х	Х	Х	Х	Х	Х			
Special Electrician	Х	Х	Х	Х	Х	Х	Х	Х		Х	
Apprentice Electrician	Х	Х	Х	Х	X Optional	Х	Х	Х			
Unclassified Person	Х	Х	Х	Х	X Optional	Х	Х	Х			

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED UNTIL **ALL** ITEMS HAVE BEEN SUBMITTED AS REQUIRED **IF ANY PORTION IS LEFT BLANK, THE APPLICATION WILL BE RETURNED**

Part 1 – PERSONAL INFORMATION

<u>Nam</u>e: Full Legal Name of applicant, (LAST Name, FIRST Name, MIDDLE Name or Initial) <u>Social Security Number</u>: Provide the Social Security number that is used by the applicant. Iowa law requires the Social Security Number for identification purposes. All Social Security numbers will be kept confidential <u>Date of Birth:</u> (DD/MM/YYYY)

Telephone Number:

Addresses: (Mailing Address, City, County, State, Zip Code) - Provide the US Postal Service-approved mailing address, and e-mail address of the applicant

Part 2- LICENSE TYPE: ALL APPLICANTS MUST PROVIDE QUALIFICATIONS FOR TYPE OF LICENSE DESIRED

1. **DESIGNATE TYPE OF LICENSE DESIRED:** Indicate the type of license desired by checking the appropriate boxes:

Electrical Contractor or Residential Electrical Contractor: A person affiliated with an electrical contracting firm or business who is licensed by the Board as a Master Class A, Master Class B, Residential Master Electrician or who employs a Master Class A, Master Class B, or Residential Master Electrician; and who is also **registered with the State of Iowa Division of Labor as a contractor.**

<u>Master Electrician</u>: A person having the necessary qualifications and technical knowledge to properly plan, design, lay-out, build, install, and supervise the installation of electrical wiring and equipment for light, heat, and power and who is licensed by the Board.

Class A: License was obtained by written supervised Iowa Block, Thomson, Experior, Prometric, PSI, exam prior to October 1, 2008 or Board-approved state examination, and is not subject to the restrictions of a Class B license.

Class B: License may be granted to a master electrician who can present credible evidence of having worked for a total of 16,000 hours of cumulative experience as a master electrician, of which at least 8,000 hours shall have been worked since January 1, 1998 and whose experience as a master electrician began on or before January 1, 1998. This license is subject to restrictions by political subdivisions.

<u>Residential Master Electrician</u>: A person having the necessary qualifications, training, experience, and technical knowledge to properly plan, lay-out, install, and supervise the performance of a residential installation in which there are **no more than four living units within the same building**. License requires the passing of a supervised examination approved by the Board.

Journeyman Electrician: A person having the necessary qualifications, training, experience and technical knowledge to wire for or install electrical wiring, apparatus, and equipment and to supervise apprentices and unclassified persons and who is licensed by the Board and employed by a State of Iowa-licensed electrical contractor.

Class A: License was obtained by written supervised Iowa Block, Thomson, Experior, Prometric, PSI, exam prior to October 1, 2008 or Board-approved state examination and is not subject to the restrictions of a Class B license

Class B: License is granted to a journeyman electrician who can present credible evidence of having worked for a total of 16,000 hours of cumulative experience as a journeyman electrician, of which at least 8,000 hours shall have been worked since January 1, 1998 and whose experience as a journeyman or master electrician began on or before January 1, 1998. This license is subject to restrictions by political subdivisions.

<u>Residential Electrician</u>: A person having the necessary qualifications, training, experience, and technical knowledge to perform a residential installation in which there are **no more than four living units within the same building** and who is employed by a State of Iowa-licensed electrical contractor or residential electrical contractor. License requires the passing of a supervised examination approved by the Board.

Special Electrician: Persons having the necessary qualifications, training and experience in wiring or installing of special classes of electrical wiring, apparatus, equipment, or installations which shall include irrigation system wiring, disconnecting and reconnecting of existing air conditioning and refrigeration equipment, and sign installations.

Special Electrician Endorsements: Each endorsement is an area of specialty electrical work that has different qualifications from those of a Master, Journeyman, or Residential license. The fee allows for one or more endorsements, and there is no additional fee for an applicant to have more than one endorsement.

1) Irrigation System Wiring: This endorsement requires completion of two years or 4,000 hours of verified documented experience in the wiring of irrigation systems, or by passing a written supervised exam approved by the Board.

2) Disconnecting/ Reconnecting of Existing Air Conditioning and Refrigeration Equipment: This endorsement requires the applicant to have two years of documented experience in the air conditioning and refrigeration trade or by, passing an examination approved by the Board.

Exception: An individual who holds a Master HVAC, Journeyperson HVAC, Master Refrigeration, or Journeyperson Refrigeration license issued by the Iowa Plumbing and Mechanical Systems Board is not required to hold a license issued by the Electrical Examining Board in order to disconnect and reconnect existing air conditioning and refrigeration systems.

3) Sign Installation: This endorsement allows a licensee to connect power to signs. There are no examination or experience requirements for this endorsement. This endorsement does **not** authorize a licensee to connect power to a sign that has a voltage greater than 220 Volts and an ampere rating of greater than 20 amps. Initial installation and/or upgrading of the branch circuit(s) supplying power to the sign **shall be installed by a licensed electrical contractor.**

Apprentice Electrician: A person's principal occupation is engaging in learning and assisting in the installation, alteration, and repair of electrical wiring, apparatus, and equipment as an employee of a person licensed by the Board, and is progressing toward the completion of an apprenticeship training program registered by the Bureau of Apprenticeship and Training with the United States Department of Labor. A document of indenture (ETA 671) or approval from the Apprenticeship Program must accompany the application. The work of the Apprentice Electrician must have on-the-job supervision by a State of Iowa-Licensed Master, Residential Master, Journeyman, or Residential electrician.

<u>Unclassified Person</u>: Any person other than an apprentice electrician or other person licensed by the Board, who, as such person's principal occupation, is engaged in learning and assisting in the installation, alteration, and repair of electrical wiring, apparatus, and equipment as an employee of a State of Iowa-licensed Electrical Contracting company. The work of the Unclassified Person **must have on-the-job supervision** by a State of Iowa-Licensed Master, Residential Master, Journeyman, or Residential electrician.

2. APPLICATION FOR LICENSE BY:

Examination: Check this box if you have taken and passed the Block, Thomson, Experior, Prometric, or PSI exam in Iowa, or other Board-approved examination, or if you plan to take an examination sponsored by the State of Iowa to obtain an electrician license. Documented proof of passing the examination or the Testing Sponsorship Request Form must accompany this application to be considered for the Class A license. All experience requirements and qualifications per the Iowa Electrical Examining Board must be met to allow sponsorship for the examination.

<u>Reciprocal</u>: At this time, Iowa reciprocates the Journeyman license with the states of Minnesota, Nebraska, and South Dakota; and the Master license with Minnesota and South Dakota. If you have held a current license from one of those states for more than a year, and have received the license as a result of passing that state's exam with a score of 75% or greater, AND meet Iowa's licensure requirements for the Journeyman or Master license, you may request the State of Iowa license. **Please include a copy of the originating state's license**.

Proof of Work Experience: Check this box if you intend to obtain a Class B license, a Special Electrician endorsement, or the Unclassified Person license, by providing proof of work experience.

Existing City License in Iowa: Check this box if you intend to obtain a license by indicating that you currently possess an electrician's license that was obtained through a local Iowa political subdivision that required the passing of a Block, Thomson, Experior, Prometric, or PSI written supervised examination in Iowa prior to October 1, 2008 in order to obtain licensure. **Provide a copy of the license and testing results with your application.**

<u>Apprentice Program</u>: Check this box ONLY IF you are currently enrolled in an Apprentice Program registered by the U.S. Department of Labor. Provide the name of your Apprentice Program, and the date that you were registered with the USDOL. Documented proof of your enrollment must accompany the application.

Part 3 - SCREENING QUESTIONS

Answer **all** questions in this section. **If you checked "YES" to any question**, please explain in the "Remarks" section on Page 3, or on a separate sheet of paper. **Failure to do so could result in your license being delayed.**

Part 4 - EDUCATIONAL RECORDS

If you have attended a 1-year or 2-year Board-approved Post-Secondary Electrical Program in electrical wiring, any post-high school electrical training program, **or if you are currently enrolled** in a registered electrical apprentice training program, please include the information here, even if you did not graduate or receive a degree/certificate. Check the YES box only if you received a degree or certificate, and attach a copy of the degree or certificate. If none of the questions apply, check the NO box for each question and continue to the next section of the form.

Part 5 - CURRENT ELECTRICAL LICENSES IN FORCE

If you do not currently have any electrical licenses in force, write N/A or "NONE" across the field. **Type of license, issuing jurisdiction, license number, year license issued, and expiration date of**

license – Enter the Type of License (Master, Journeyman, Electrical Contractor, etc.), jurisdiction that issued license (i.e. City of Des Moines, State of Nebraska, Linn County), License Number, Year license was issued (**Original** Issue Date), and expiration date of license.

IS THIS LICENSE CURRENT/ ACTIVE? : Check the appropriate box if your current license is active and up-to-date.

WAS THE LICENSE OBTAINED BY EXAMINATION?: Check the appropriate box if the license you currently hold was obtained by passing a written supervised examination.

Part 6 - PRACTICAL ELECTRICAL WORK EXPERIENCE

PRACTICAL ELECTRICAL EXPERIENCE: On the left side of the section provide the amount of time the applicant was performing at the various levels of electrical occupations. If you are a newly-hired Apprentice, put the number 1 next to the "Apprentice" category. If you are a newly-hired Unclassified Person, put the number 1 next to the "Other" category and write "Helper".

On the right side of the section provide the percentage of time that the applicant spent in each type of work. The total percentage must add up to 100%. (For example, 80% Commercial, 10% Residential, 5% Fire Alarms, 5% Refrigeration)

REFERENCES: Provide names, addresses, and phone numbers of 3 persons or firms, preferably in the electrical industry, to be used as references. These can be supervisors, instructors, mentors, co-workers, supply houses, clients.... (Anyone who would vouch for the work you perform.)

<u>REMARKS</u>: Space provided for explanation of Screening Questions, comments, or additional information that would assist the Board in evaluating your application.

Part 7 - VERIFIABLE ELECTRICAL WORK EXPERIENCE

ALL APPLICANTS MUST PROVIDE VERIFIABLE ELECTRICAL WORK EXPERIENCE

Name of Current/ Previous Employer: Provide names of present and previous employers. If self-employed, list your company name and indicate self-employed. If you are a union-member, please list the name, address, and phone number of the union as your employer if the union assigns you to contractors. You may use a print-out from your local or your benefits office to support the hours of experience.

<u>Mailing Address</u>: Mailing Address of Employer (Mailing Address, City, State, Zip Code) <u>Dates of Employment</u>: Approximate start and ending dates

Job Title: Specify Laborer or Helper, Apprentice, Journeyman, Foreman, Master, Contractor, etc.

IF "ELECTRICIAN" IS LISTED, THE FORM WILL BE RETURNED

Employers' Phone Numbers:

Reason for Leaving: Indicate the reason for leaving (i.e. Better Opportunity, Resigned, Laid Off, Fired, etc.) **Duties:** Provide a detailed explanation of the nature of work that the applicant performed during employment: FORMS STATING, "ELECTRICAL WORK", "ELECTRICIAN DUTIES", or "ALL ASPECTS OF ELECTRICAL WORK" WILL BE RETURNED. Specify electrical functions and tasks performed.... i.e. bend conduit, wire switches, pull wire.... This is to show the "variety and scope" of the electrical work that the applicant has performed.

Part 8- APPLICANT SIGNATURE – Sign and date the application

Documents submitted with the application WILL NOT BE RETURNED. Keep a copy of the completed application, of all attachments and of your check. Do not submit pages that you are not required to have completed.

Before you sign, carefully read the statement at the bottom of the application. Be aware that information provided on this application and any attachments are subject to audit. Providing false information may result in revocation of this license and imposition of administrative penalties.

Part 9- ELECTRICAL CONTRACTOR- This portion of the application is to be completed only by those applying for an Electrical Contractor or Residential Electrical Contractor License. A State of Iowa-Licensed Master Electrician, Residential Master or applicant is required to be an employee of the Electrical Contractor

Name of Responsible Master Electrician: Print the name of the Responsible Master Electrician or applicant who is employed by the Electrical Contractor or Residential Electrical Contractor applicant. This may be the same name as the Electrical Contractor or Residential Electrical Contractor applicant.

Name of Contractor (Whomever will be the holder of the license): Print the name of the Contractor (i.e. Master, company-owner, officer of corporation, etc.).

Have you completed and attached a Certificate of Responsible Licensed Master? (Page 10): Check the appropriate box. IF THE ANSWER IS "NO", THEN THE LICENSE WILL NOT BE ISSUED. A Responsible Master Electrician Certificate is required in order for the applicant to be issued an Electrical Contractor or Residential Electrical Contractor License.

<u>Business Name:</u> This is the name that will appear on the Electrical Contractor or Residential Electrical Contractor License. Enter the business name of contractor as it appears on the Contractor Registration Form issued by the Iowa Division of Labor

Business Address: Address of the business

Mailing Address: Required if different from business address, otherwise write, "SAME".

Are you registered as a contractor with the state of lowa? – Check the appropriate box. IF THE ANSWER IS "NO", THEN THE LICENSE WILL NOT BE ISSUED. The Iowa Workforce Development Contractor Number (IWD#) is required in order for the applicant to be issued an Electrical Contractor or Residential Electrical Contractor License.

Iowa Division of Labor Contractor Registration #: Provide the registration number of the Electrical Contractor or Residential Electrical Contractor as provided by the Iowa Division of Labor. To contact Iowa Division of Labor go to their website at http://www.iowaworkforce.org/labor/contractor.htm, or call (515) 281-5387 or (Toll-free in Iowa) 1-800-562-4692.

Federal Tax ID# or Employer Identification #: Provide the federal tax identification number or employer identification number assigned to the business by the U.S. Department of Treasury: Internal Revenue Service. Sole proprietorships and partnership should provide their Social Security number(s) in lieu of the employer identification number. All employer identification numbers and Social Security numbers will not be part of the public record, and will be kept confidential.

<u>Certificate of Liability Insurance:</u> Iowa law requires that the electrical contractor shall provide proof and shall maintain at least \$1,000,000 general and complete operations liability coverage. Please have your insurance agent Fax or e-mail to us the Certificate of Liability Insurance with the Contractor Representative name below the company name as insured on the form. Certificate Holder should be the Iowa Electrical Examining Board, 215 E. 7TH ST, Des Moines, IA 50319. The Fax number is (515) 725-6151, and the e-mail address is elecinfo@dps.state.ia.us.

Signature of Contractor: Contractor must sign and date application.

Signature of Responsible Master: Responsible Master Electrician must sign and date application. These signatures may be by the same person if BOTH licenses are to be issued to the applicant.

CLASS B AFFIDAVIT FORM: This form is used to verify that the applicant has accumulated at least 16,000 hours of electrical experience, of which at least 8,000 hours shall have been worked after 01/01/1998, and whose experience began on or before 01/01/1998

CHOOSE EITHER THE MASTER OR JOURNEYMAN AFFIDAVIT. THIS PROVISION ONLY APPLIES TO THOSE APPLYING FOR THE MASTER OR JOURNEYMAN CLASS B LICENSE

Print Name of Qualifying Party: Print name of applicant applying for Class B license **Signature of Qualifying Party:** Signature of applicant applying for Class B license **Name of Business:** Print Name of Business or Union Local Number that applicant works for/ owns **Date:** Print date that the form was completed.

THIS FORM IS REQUIRED TO BE NOTARIZED: The bottom of this form is required to be completed by a notary of the public. A notary of the public is required to witness that the signature of the person signing this document is authentic.

<u>SPECIAL ELECTRICIAN AFFIDAVIT FORM:</u> This information is used to verify that the applicant meets the experience requirements for a particular special electrician endorsement. IF YOU ARE APPLYING FOR A SPECIAL ELECTRICIAN LICENSE THAT IS BASED UPON WORK EXPERIENCE, THIS FORM IS REQUIRED TO BE COMPLETED.

SELECT A SPECIAL ELECTRICIAN ENDORSEMENT. MULTIPLE ENDORSEMENTS MAY BE CHOSEN.

<u>Print Name of Qualifying Party:</u> Print name of applicant applying for Special Electrician license <u>Signature of Qualifying Party:</u> Signature of applicant applying for Special Electrician license <u>Name of Business</u>: Print Name of Business or Union Local Number that applicant works for/owns <u>Date:</u> Print date that the form was completed

THIS FORM IS REQUIRED TO BE NOTARIZED: The bottom of this form is required to be completed by a notary of the public. A notary of the public is required to witness that the signature of the person signing this document is authentic.

CERTIFICATE OF RESPONSIBLE LICENSED MASTER: This form is to designate a master electrician who is responsible for the electrical contracting firm and who will assume the responsibility for compliance of the Iowa Administrative Code 661 and the requirements of the Iowa Electrical Examining Board.

<u>Name of Licensee, City, and State:</u> Print name, city and state of residence of the State of Iowa-Licensed Master Electrician, Residential Master Electrician, or Master License applicant who will be named as the Responsible Licensed Master.

<u>Name of Electrical Contracting Firm</u>: Print business name, city, and state of contractor. This must be the same name listed on Part 9 on Page 6, and field number 1.

Signature, Social Security Number, and Date of Birth of Master Electrician, Residential Master Electrician, or Master License Applicant: This must be the same as that listed on the license application of the Master Electrician. All social security numbers will be kept confidential

THIS FORM IS REQUIRED TO BE NOTARIZED: The bottom of this form is required to be completed by a notary of the public. A notary of the public is required to witness that the signature of the person signing this document is authentic.

TESTING SPONSORSHIP REQUEST FORM: To be completed ONLY by those wishing to take the license exam(s).

Complete the request and submit it **on top of the first page** of the application. When reviewed and approved for sponsorship, we will send to you the Test Registration Form. With the information provided on the form, you will contact the PSI Testing service to schedule a site and date for the exam. After receiving the passing test results, please contact us concerning issuance of the license. The Sponsorship Request Form can be found at: <u>http://www.dps.state.ia.us/fm/electrician/index.shtml</u> at the bottom of the "Forms" menu-tab.

<u>AFFIDAVIT OF EXPERIENCE FOR RECIPROCAL LICENSE</u>: This form is used to verify that the applicant has accumulated at least 16,000 hours of electrical experience while licensed by the originating state.

THIS FORM IS REQUIRED TO BE NOTARIZED – Enter the name of the state whose license you currently hold and the license type you wish to receive from Iowa. The bottom of this form is required to be completed by a notary of the public. A notary of the public is required to witness the signature of the applicant, and attest that the signature is authentic. This affidavit must show the **original** signature of the applicant, so it MUST be submitted by US mail, **along** with a copy of the current state license. The Affidavit for Reciprocal License can be found at: <u>http://www.dps.state.ia.us/fm/electrician/index.shtml</u> under the second segment on the "Forms" page.

QUESTIONS?: E-mail us at <u>elecinfo@dps.state.ia.us</u> or call us at:1-866-923-1082 (in-state only) or (515) 725-6147; or FAX us at (515) 725-6151 for help.

Additional information is available at the websites: <u>http://www.dps.state.ia.us/fm/electrician/index.shtml</u> or <u>https://iowaelectrical.gov</u>

COMBINED-CHECK WORKSHEET IOWA ELECTRICAL EXAMINING BOARD



Contact Information

Na	me											
Ad	dress											
Telephone		Email										
	APPLICANT NAME		Electrical Contractor	Residential Contractor	Class A Master	Class B Master	Residential Master	Class A Journeyman	Class B Journeyman	Residential Electrician	Special Electrician	Apprentice or Unclassified Person
1 2												
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	Ad	d up each column Multiply by Fee										
	Tota	al fee due for each										
		license type										
СН	CHECK NUMBER TOTAL DUE											

Use this worksheet to submit one check to pay the fees for up to 20 applications. List each applicant's name and mark the license type they are seeking in the appropriate column. Add all of the fees due and submit one check in that amount along with all of the applications. Please note that if the names listed on this worksheet do not match those on the applications submitted or if the check is not for the correct amount, the applications will not be processed and the entire packet will be returned.