APPLICATION FOR STATE ELECTRICAL LICENSE

									NT: USE	AN INK	ST/	ATE ELEC 1220 Line		AL DIVISION
FOR SED USE ONLY				EN.		NSWE				UESTIONS			Box 9	
DATE RECEIVED			B	ER	ETURNE	E <u>D.</u> AP MUST	PLICAT	ion Mpl	APPLICATION IS FOR LIC LETELY FILL	ENSES BY		(402) FAX (40) 471-: 02) 47	
									NAI	ME				
S'O'			LAST FIRST							MIDE	DLE INITIAL			
\circ			STREE	т				CIT		less	STA	TF		ZIP CODE
			0					0						2 0002
			PHONE NUMBER SOCIAL SECURITY NUMBER								COUNTY			
								ENS	SE DESIRE			TYF	PE O	F EXAM
					Electrical (Journeyma Residentia	an Elec	trician		Fire Alarm Ir Apprentice F Special Insta	Registration		Initial		Retake
License & No.			Applic	cation	for Licens	se By:	ICC	Exa	amination					
Data loouad									city with Othe					State
Date Issued			TDIC	<u> </u>						pproved Munic ers on last p			า	City
LICENSE TYPE & NUMBER				AL	LICENS				PE & NUMBER	is on last p	Jage)		
ISSUING AUTHORITY							ISSUING	AUT	HORITY					
LICENSE WAS OBTAINED BY WRITTEN EX	AM						LICENSE	WA	S OBTAINED BY	WRITTEN EXAM				
YES NO E	DATE			YES NO DATE						_				
					DUCAT	IONA	L REC	;OF	RD					0144
TYPE Do you have an electrical engineerin	YES	NO		ROM	TTENDED TO	-	NAME 8	& LO	OCATION OF	SCHOOL				LOMA RECEIVED
degree.														
Have you completed a two-year post high school course in electrical wiring from which you received a Degree in Electrical Technology? Enclose Copy of Degree	3													
Have you completed a four-year apprentice electrician program?														
								EXF	PERIENCE					
List the Total Number of months of e ence in each category.		ехре	ri-	With		e to you	ur electri	cal	experience, ir	ndicate the per	centa	ge of time	spent	in each type
CATEGORY	IN MONTHS		_		work, listed below.					gs				
Apprentice				ove	r 2 Living	Units							-	%
Journeyman				Residential (2 Living Units or Less)					_	%				
Joh Superintendent er Earoman				Irrigation Equipment					_	%				
Job Superintendent or Foreman				Inst	alling Hor	ne App	liances							%
Owner or Manager			_	Fire	e Alarm S	ystems								%
Estimator			_	Неа	ating & Air	r Condi	tioning E	Equi	ipment					%
Other (Specify)				Ref	rigeration	Syster	ns							%
			_		-	-								

STATE OF NEBRASKA

The total work experience listed under "verifiable work experience" must equal or exceed experience requirements for the examinations requested.

VERI	FIABLE ELECTF	RICAL WORK EXPERIENCE
FIRM NAME OF CURRENT EMPLOYER		DUTIES
ADDRESS		
CITY STATE	ZIP	
STATE	ZIP	
DATE OF EMPLOYMENT	JOB TITLE	
FROM: TO:		
EMPLOYER'S TELEPHONE NUMBER & AREA CODE		
()		
FIRM NAME OF PREVIOUS EMPLOYER		DUTIES
ADDRESS		
CITY STATE	ZIP	
	JOB TITLE	
FROM: TO: EMPLOYER'S TELEPHONE NUMBER & AREA CODE		
FIRM NAME OF PREVIOUS EMPLOYER		DUTIES
		501120
ADDRESS		
CITY STATE	ZIP	
DATE OF EMPLOYMENT	JOB TITLE	
FROM: TO:		
EMPLOYER'S TELEPHONE NUMBER & AREA CODE		
() FIRM NAME OF PREVIOUS EMPLOYER		
FINM NAME OF PREVIOUS EMPLOYER		DUTIES
ADDRESS		
CITY STATE	ZIP	
DATE OF EMPLOYMENT	JOB TITLE	
FROM: TO:		
EMPLOYER'S TELEPHONE NUMBER & AREA CODE	•	
()		
FIRM NAME OF PREVIOUS EMPLOYER		DUTIES
1000500		
ADDRESS		
CITY STATE	ZIP	
SIATE	ZIF	
DATE OF EMPLOYMENT	JOB TITLE	
FROM: TO:		
EMPLOYER'S TELEPHONE NUMBER & AREA CODE		
()		
FIRM NAME OF PREVIOUS EMPLOYER		DUTIES
ADDRESS		
CITY STATE	ZIP	
	JOB TITLE	
FROM: TO: EMPLOYER'S TELEPHONE NUMBER & AREA CODE		

APPLICANTS FOR STATE ELECTRICAL EXAMINATION MUST HAVE THE FOLLOWING EXPERIENCE TO QUALITY FOR EXAMINATION						
Electrical Contractor	Be a graduate of a four-year electrical engineerin experience, acceptable to the board, as a journe	a course in an accredited college or university and have at least one year				
	Have at least one year experience, acceptable to	b the Board, as a licensed journeyman electrician; DR:				
		o the Board, in planning for, laying out, supervising, and installing wiring,				
Journeyman Electrician	Have at least 4 years verifiable experience acce	otable to the Board; JR:				
	3 years verifiable experience acceptable to th	e Board; and successful completion of a post high school course in electrical eived. See State Electrical Act, Board Rule 8 for details.				
Residential Journeyman Electrician, Type RW	Have at least 3 years verifiable experience acce	otable to the Board; JR:				
	2 years verifiable experience acceptable to the	e Board; and successful completion of a post high school course in electrical eived. See State Electrical Act, Board Rule 8 for details.				
Fire Alarm Installer	Have at least 2 years experience, acceptable to	the board, in planning, laying out, and installing fire alarm systems.				
	APPLICA	TION FEES				
Spec	cial Installer	\$60.00				
Elect	rical Contractor	\$125.00				
Jourr	neyman Electrician	\$60.00				
Resid	dential Journeyman Electrician, Type RW	\$60.00				
Fire /	Alarm Installer	\$60.00				
	LICENSE AND RE	GISTRATION FEES				
Issued in EVEN numbere	d years:	Issued in ODD numbered years:				
Electrical Contractor	\$125.00	Electrical Contractor \$250.00				
Journeyman Electrician .	\$25.00	Journeyman Electrician \$50.00				
Residential Journeyman E	Electrician, Type RW \$25.00	Residential Journeyman Electrician, Type RW \$50.00				
Fire Alarm Installer	\$25.00	Fire Alarm Installer \$50.00				
	\$20.00 \$25.00	Apprentice Registration \$40.00 Special Installer \$50.00				
	LICENSE [DEFINITIONS				
Electrical Contractor	Is licensed to bid, plan, layout, install and super in the State of Nebraska.	vise the installation of electrical wiring, apparatus, and equipment anywhere				
Journeyman Electrician	Is licensed to install electrical wiring, apparatus State of Nebraska.	s, and equipment, and to supervise apprentice electricians, anywhere in the				
Residential Journeyman Electrician, Type RW	apprentice electricians anywhere in the State of	, apparatus, and equipment for residential installations and to supervise Nebraska. Residential installations are defined as installations intended for , or a multi-family residential dwelling not larger than three stories in height.				
Fire Alarm Installer	Is licensed to plan, lay out, and install electrical v tems that operate at fifty volts or less, anywher	riring, apparatus, and equipment for only those components of fire alarm sys - e in the State of Nebraska.				
Apprentice Electrician	Shall do no electrical wiring except under the presence of a licensee under the State Electrica not to exceed three apprentice electricians to o	direct personal on-the-job supervision and control and in the immediate Act. The licensee may employ or supervise apprentice electricians at a ratio ne licensee.				
	ADDITIONAL INSTRUCT	ONS – READ CAREFULLY				
Reciprocal Applicants application fee pl		enses are required to submit a registration fee equal to the				
1		nts are only required to submit correct license fee. application. Refunds will not be made for processed applications,				
		nclose a copy of the Associates Degree in Electrical Technology ds to use it for the one-year work experience credit.				
		d to enclose a copy of the Associates Degree in Electrical Technology ds to use it for the one-year work experience credit.				
employers. Inc		omplete mailing addresses for current and previous application rejection. Verification letters from employers				
Review Failed Examin	ation: There will be no review of failed exan	ns by our office.				
Application For Apprentice Registration: Must include current employer information.						

NOTE: USE THIS SPACE TO LIST OTHER ELECTRICAL LICENSES, WORK EXPERIENCE OR OTHER EDUCATION IF YOU BELIEVE SUCH INFORMATION WILL IMPROVE YOUR PROSPECT OF BEING GRANTED THE LICENSE YOU DESIRE.					
APPLICATION FEES MUST ACCOMPANY THIS APPLICATION.					
REFUNDS WILL NOT BE MADE FOR PROCESSED APPLICATIONS, EVEN IF REJECTED.					

I hereby swear that the foregoing statements are true and correct to the best of my knowledge and belief. I grant permission to the State Electrical Board to contact employers, schools, etc., listed therein for the purpose of verifying information submitted.

EMAIL ADDRESS: _____

Needed for contact purposes

sign 🚬	
here	SIGNATURE OF APPLICANT

date:

NOTICE: Fees necessary to cover State Electrical Division costs associated with returned checks will be charged, and cash, certified, or cashier's checks to cover both those fees and the regular application fee will be required thereafter, prior to examination application processing.

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:



I am a citizen of the United States.

— OR —

I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: ________, Please provide 2 forms (front & back clear copies of Identifications-one document must be USCIS.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME	<u>(first, middle, last)</u>			
SIGNATURE				
DATE				