



INSTRUCTIONS FOR APPLICATION FOR ELECTRICIAN'S LICENSE
IOWA STATE ELECTRICAL BOARD

Instructions for Filling out the Application for Electrician's License

AN APPLICATION IS NOT CONSIDERED COMPLETE AND 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 using upper cases letters. The application and all attachments must be submitted on separate pieces of single-sided, 8½” 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, 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 Department's Website.

All CHECKS TO BE MADE PAYABLE TO: TREASURER- STATE OF IOWA

THE FOLLOWING MATRIX SHOULD BE USED TO DETERMINE WHICH PORTIONS OF THE LICENSE APPLICATION ARE REQUIRED TO BE FILLED OUT BASED ON THE TYPE OF LICENSE THAT IS DESIRED.

Type of License	Part 1 License Type	Part 2 Personal Information	Part 3 Educational Record	Part 4 Current Electrical Licenses in Force	Part 5 Screening Questions	Part 6 Practical Electrical Work Experience	Part 7 Verifiable Electrical Work Experience	Part 8 Applicant Signature	Part 9 Electrical Contractor	Class B Affidavit	Certificate of Master Electrician for Electrical Contractor
Electrical Contractor	X	X		X	X			X	X		X
Class A Master Electrician	X	X	X	X	X	X	X	X			
Class B Master Electrician	X	X	X	X	X	X	X	X		X	
Class A Journeyman Electrician	X	X	X	X	X	X	X	X			
Class B Journeyman Electrician	X	X	X	X	X	X	X	X		X	
Special Electrician	X	X	X	X	X	X	X	X			
Apprentice Electrician	X	X	X		X	X	X	X			
Unclassified Person	X	X	X		X	X	X	X			

ALL APPLICANTS MUST PROVIDE QUALIFICATIONS FOR TYPE OF LICENSE DESIRED

Part 1 – LICENSE TYPE

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

Electrical Contractor – A person affiliated with an electrical contracting firm or business who is licensed by the board as either a Class A or Class B Master Electrician and who is also registered with the state of Iowa as a contractor

Master Electrician – A person having the necessary qualifications and technical knowledge to properly plan, lay out, and supervise the installation of electrical wiring and equipment for light, heat, and power.

Class A - License was obtained by written supervised examination and is not subject to the restrictions of a Class B license

Class B – License is granted by proven experience since 1990. License is subject to restrictions by the board and local political subdivisions.

Journeyman Electrician – Persons having the necessary qualifications to wire for or install electrical wiring and equipment.

Class A - License was obtained by written supervised examination and is not subject to the restrictions of a Class B license

Class B – License is granted by proven experience since 1990. License is subject to restrictions by the board and local political subdivisions.

Special Electrician – A person having the necessary qualifications to install 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.

Apprentice Electrician – A person who is engaged 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 program registered by the bureau of apprenticeship and training with the United States Department of Labor.

Unclassified Person – Any person other than an apprentice electrician or other person licensed under this licensing act, 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 person licensed under this licensing act.

2. APPLICATION FOR LICENSE BY:

Examination – Check this box if you plan to take an examination sponsored by the state of Iowa to obtain an electrical license. All experience requirements and qualifications per the State Electrical Board must be met to allow one to take the examination.

Reciprocal – Check this box if you intend to obtain your license through reciprocity with states that have entered into a reciprocity agreement with the state of Iowa. At this time, Iowa does not have any reciprocity agreements with any other state. Please check the following website for updates of reciprocity agreements. <http://www.dps.state.ia.us/fm/electrician/index.shtml>

Proof of Work Experience – Check this box if you intend to obtain a Class B 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 electrical license that was obtained through a local Iowa political subdivision that required the passing of a written supervised examination in order to obtain licensure. Provide a copy of the license and testing results with your application.

Part 2- PERSONAL INFORMATION

NAME – Full Name of applicant – *Electrical Contractor Business Name is required in a later section*

SOCIAL SECURITY NUMBER – Provide the Social Security number that is used by the applicant. All social security numbers will be kept confidential

MAILING ADDRESS (Mailing Address, City, County, State, Zip Code) - Write the mailing address of the applicant

Part 3 - EDUCATIONAL RECORD

If none of the questions apply, check the NO box for each question and continue to the next section of the form.

Part 4 -CURRENT ELECTRICAL LICENSES IN FORCE

If you do not currently have any electrical licenses in force, leave this section blank or write "NONE" next to CURRENT LICENSES IN FORCE Column.

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 5 – SCREENING QUESTIONS

Answer all questions in this section. Failure to do so could result in your license being delayed.

Part 6- PRACTICAL ELECTRICAL WORK EXPERIENCE

For Class B License Work Experience please refer to page 5. – If you are applying for a Class B license, page 5 is required to be filled out as well as the verifiable electrical work experience section.

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. On the right side of the section provide the percentage of time that the applicant spent in each type of work. The total percentage should add up to 100%.

REFERENCES: - Provide 3 persons or firms, preferably in the electrical industry, to be used as references

REMARKS: - Space provided for comments or additional information that would assist the board in evaluating your application.

Part 7 - VERIFIABLE ELECTRICAL WORK EXPERIENCE

Name of Current/ Previous Employer – Provide names of present and previous employers. If self employed, list company name and indicate self-employed.

Mailing Address – (Mailing Address, City, State, Zip Code) – Mailing Address of Employer

Reason for Leaving – Indicate reason for leaving (i.e. Better Opportunity, Resigned, Laid Off, Fired, etc.)

Duties– Provide an explanation of the nature of work that the applicant performed during employment (i.e. 3 months installing residential wiring or 15 months installing commercial wiring)

Part 8- APPLICANT SIGNATURE– Sign and date the application

Please remember that the application must be completed in blue or black ink and all attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Please use a paperclip to fasten all pages together. Do not use staples. Any deviation from these instructions may delay the processing of your application.

Documents submitted with the application will not be returned. Keep a copy of the completed application, all attachments and your check. Do not submit forms that you did not have to complete.

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 to completed by those applying for an Electrical Contractor license. A Master Electrician license is required for an electrical contractor.

Name of Responsible Master Electrician – Print the name of the Responsible Master Electrician that is required to be or be employed by the Electrical Contractor

Name of Contractor Representative – Print the name of the Contractor Representative (i.e. owner, officer of corporation, etc.).

Have you completed and attached a Certificate of Responsible Licensed Master? – Check the appropriate box. A Certificate of Responsible Master Electrician is required to obtain an Electrical Contractor License.

Business Name of Contractor – Enter the business name of contractor as it appears on the Contractor Registration Form issued by the Iowa Division of Labor, except for an individual (sole proprietor) or a partnership making application using the individual's or all partners' own full true name(s) as the contractor name. Examples of business names:

- An individual without an assumed name – John Doe or John Doe Electric
- An individual with an assumed name – John Doe dba Assumed Name
- A partnership with an assumed name – John Doe and Jane Doe dba Assumed Name
- A corporation – Company Name, Inc.
- A corporation with an assumed name – Company Name Inc. dba Assumed Name
- A limited liability company – Company Name, LLC or LLP

Business Address – Address of the business

Mailing Address – Required if different from business address

Are you registered as a contractor with the state of Iowa? – Check the appropriate box. An electrical contractor is required to be registered as a contractor with the state of Iowa before they can receive an electrical contractor license. To check on the status of registration follow the web link: <http://www.iowaworkforce.org/labor/contractor.htm>

Iowa Division of Labor Contractor Registration # - Provide the registration number of the electrical contractor as provided by the Iowa Division of Labor. To check the requirements of the Iowa Division of Labor go to their web site at <http://www.iowaworkforce.org/labor/contractor.htm>

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 be not be part of the public record and will be kept confidential.

Signature of Contractor Representative – Contractor Representative to sign and date application

Signature of Responsible Master or Master Applicant – Responsible Master Electrician or Master Electrician Applicant to sign and date application

CLASS B AFFIDAVIT FORM – This form is used to verify that you have been practicing as an electrician on or before 1990.

CHOOSE EITHER THE MASTER OR JOURNEYMAN AFFIDAVIT

Print Name of Qualifying Party – Print name of applicant applying for Class B license

Signature of Qualifving Party – Signature of applicant applying for Class B license

Name of Business- Print Name of Business that applicant works for/ owns

Date – Print date that the form was filled out.

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

A notary of the public in your area can be found at the following web site: <http://www.sos.state.ia.us/notaries/index.html> This website contains a searchable database of notaries of the public in your area.

CERTIFICATE OF RESPONSIBLE MASTER – This form is to designate a master electrician that is responsible for the electrical contractor

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

A notary of the public in your area can be found at the following web site: <http://www.sos.state.ia.us/notaries/index.html> This website contains a searchable database of notaries of the public in your area.



COMBINED CHECK WORKSHEET
IOWA STATE ELECTRICAL BOARD

Contact Information

Name			
Address			
Telephone		Email	

	APPLICANT NAME	Electrical Contractor	Class A Master	Class B Master	Class A Journeyman	Class B Journeyman	Special Electrician	Apprentice or Unclassified Person
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
	Add up each column							
	Multiply by Fee							
	Total fee due for each license type							

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.