

LICENSE NO: _____

LICENSE FEE: _____

DATE ISSUED: _____

ELECTRICIAN

RECEIPT NO: _____



City of Long Beach
Office of the City Clerk
1 West Chester Street, Long Beach, NY 11561 • (516) 431-1002

APPLICATION FOR CERTIFICATE OF COMPETENCY OR ELECTRICIAN'S LICENSE

PLEASE PRINT

**TO THE EXAMINING BOARD OF ELECTRICIANS, CITY OF LONG BEACH,
NASSAU COUNTY, NEW YORK:**

**ATTACH 2" x 2"
PHOTO HERE**
(New Applications Only)

ELECTRICIAN INFORMATION

FULL NAME		
HOME ADDRESS		
HOME TELEPHONE NUMBER:	CELL NUMBER:	
EMAIL:	DATE OF BIRTH:	
YEARS EMPLOYED AS A JOURNEYMAN ELECTRICIAN:	YEARS EMPLOYED AS A MASTER OR EMPLOYING ELECTRICIAN:	
ARE YOU PRESENTLY CONDUCTING BUSINESS OR DOING ELECTRICAL WORK ON YOUR OWN ACCOUNT? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU READ AND DO YOU UNDERSTAND THE ELECTRICAL CODE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
COMPETENCY: TEST TAKEN/COMPETENCY ISSUED FROM? - Include Certificate of Competency and current license.		
<input type="checkbox"/> LONG BEACH <input type="checkbox"/> TOWN OF HEMPSTEAD <input type="checkbox"/> NONE – Must take exam		
HAVE YOU EVER:		
(A) HELD LICENSES PREVIOUSLY? <input type="checkbox"/> YES <input type="checkbox"/> NO	(B) HAD A LICENSE REVOKED? <input type="checkbox"/> YES <input type="checkbox"/> NO	(C) BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES EXPLAIN: _____

REFERENCES

PLEASE LIST NAMES AND ADDRESSES OF LICENSED ELECTICIANS WHO HAVE EMPLOYED YOU TO DO ELECTRICAL WORK AT ANY TIME DURING THE PAST SEVEN YEARS. SUBMIT W2 FORMS FOR THE PAST SEVEN YEARS:

NAME	ADDRESS	TEL #

COMPANY INFORMATION

TRADE NAME:	
CORPORATE NAME:	
BUSINESS ADDRESS:	
TELEPHONE NUMBER:	FAX NUMBER:

COMPANY BUSINESS REFERENCES

PLEASE LIST THREE (3) BUSINESS REFERENCES:

NAME	ADDRESS	TYPE OF BUSINESS	TEL #

BOTH VOUCHERS MUST BE LICENSED AND REGISTERED ELECTRICIANS

CERTIFICATE NO. 1

STATE OF NEW YORK
COUNTY OF NASSAU SS:

I hereby swear that I am engaged in the electrical business and that I have employed and have known _____ the applicant herein as a Master Electrician (Journeyman Electrician) from _____ : that I have found him to be competent, sober and industrious, and that I consider him qualified to be a Master or Employing Electrician.

I further swear that I have read the statements made by him in this application and I believe them to be true.

Remarks: _____

Place of Business: _____ City (Village): _____

Current Year Electrical License No.: _____ Issued City/Town/Village: _____

Certificate of Competency No.: _____

SWORN TO BEFORE ME THIS _____ DAY
OF _____, 20_____

NOTARY PUBLIC

PRINT NAME

SIGNATURE

RESIDENCE

CERTIFICATE NO. 2

STATE OF NEW YORK
COUNTY OF NASSAU SS:

I hereby swear that I am engaged in the electrical business and that I have employed and have known _____ the applicant herein as a Master Electrician (Journeyman Electrician) from _____ : that I have found him to be competent, sober and industrious, and that I consider him qualified to be a Master or Employing Electrician.

I further swear that I have read the statements made by him in this application and I believe them to be true.

Remarks: _____

Place of Business: _____ City (Village): _____

Current Year Electrical License No.: _____ Issued City/Town/Village: _____

Certificate of Competency No.: _____

SWORN TO BEFORE ME THIS _____ DAY
OF _____, 20_____

NOTARY PUBLIC

PRINT NAME

SIGNATURE

RESIDENCE