

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	
<b>COMPETENCY: TEST TAKEN/COMPETENCY ISSUED FROM? - Include Certificate of Competency and current license.</b> <input type="checkbox"/> LONG BEACH <input type="checkbox"/> TOWN OF HEMPSTEAD <input type="checkbox"/> NONE – Must take exam		
<b>HAVE YOU EVER:</b>		
(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 #

**VEHICLE INFORMATION**

*Vehicle Stickers must be displayed on ALL vehicles used in conducting your business in the City of Long Beach.  
The first two stickers are included in your fee; each additional sticker is \$12.00.  
Please attach a copy of a valid registration for each vehicle*

Year	Make/Model	License Plate #	<u>OFFICE USE ONLY</u> Sticker #

**PLEASE INCLUDE WITH YOUR APPLICATION:**

- **Initial Application Fee:** \$530.00
- **Exam Fee:** \$30.00 (If needed)
- Applicant must furnish Worker’s Compensation (C-105.2 or U-26.3 form) & Disability Benefits Law compliance certificate. If working alone, a Certificate of Attestation of Exemption (Form CE-200) and Compliance with the Disability Benefits Law.
- Copy of Certificate of General Liability Insurance in the amount of \$500,000. The City of Long Beach is to be listed as the “Certificate Holder”.
- Copies of W2 forms for the past seven (7) years.
- If applying for reciprocal license, include a copy of your current Electricians License **and** Certificate of Competency from the Town of Hempstead.
- BOTH vouchers on page 3 must be completed.

**APPLICANT CERTIFICATION**

**STATE OF NEW YORK:**  
**COUNTY OF NASSAU : SS:**

I hereby declare, under oath, that I fully understand and have answered all the above questions truthfully; that I am the person who is to be examined if examination is required and that I have affixed my signature to this application. In consideration of being granted the license applied for, I hereby agree to comply with all the rules and regulations of the Police Dept., the laws of the City of Long Beach, State of New York, and other proper authorities. I also understand that any violation of said rules and regulations or laws may result in the suspension or revocation of license.

SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY

\_\_\_\_\_ TRADE NAME

OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_ PRINT NAME

\_\_\_\_\_ NOTARY PUBLIC

\_\_\_\_\_ SIGNATURE

**BOARD APPROVAL**

THE UNDERSIGNED HEREBY APPROVES \_\_\_\_\_ DISAPPROVES \_\_\_\_\_ THE FOREGOING APPLICATION.

DATED: \_\_\_\_\_ BY: \_\_\_\_\_

**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

\_\_\_\_\_  
PRINT NAME

OF \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
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

\_\_\_\_\_  
PRINT NAME

OF \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
RESIDENCE