



Licensing Division, MS 6006
Department of Inspections and Permits
2664 Riva Road, Annapolis, MD 21401
Telephone: (410) 222-7788
Fax: (410) 222-4488
www.aacounty.org

ELECTRICIANS EXAM

Fee: \$75.00
Remit with application

Application must be submitted
30 days prior to exam

Check one: Master General Master Limited Restricted

For Master Limited indicate name of plant where being used.

Place a clear, front face
photo here!

For Restricted License – Check types of work:

Heating & A/C (01) Electric Signs (07)
 Low Voltage/Communications (02) Water Conditioner (14)
 Fire Alarms (04)

PRINT FULL NAME _____ PHONE _____

STREET ADDRESS _____ COUNTY _____

CITY _____ STATE _____ ZIP CODE _____

E-mail Address _____

REQUIREMENTS

1. MASTER GENERAL ELECTRICIAN – Must have been continuously engaged during the three (3) years immediately preceding the date of this application as an apprentice, journeyman or helper under the direction and supervision of Master Electrician. Must have a total of seven (7) years.
2. MASTER LIMITED (Plant work only) – Must have worked under the direction and supervision of a licensed Master General Electrician or Master Limited Electrician for not less than two (2) years immediately preceding the date of his application.
3. RESTRICTED ELECTRICIAN – Same as Master General or have worked under the direction and supervision of a licensed Restricted or Master Limited Electrician for not less than one (1) year immediately preceding the date of application.

****** ALL APPLICATIONS MUST BE ACCOMPANIED WITH REFERENCE LETTERS FROM EMPLOYER(S). THESE LETTERS MUST STATE HOW LONG YOU WORKED FOR THAT COMPANY AND IN WHAT CAPACITY. THE LETTERS MUST STATE THE NAME AND LICENSE NUMBER OF YOUR SUPERVISOR. ******

Education and Related Experience

Name of School (High School and Trade Schools)	Location	Years Attended	Grad Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe any special study, correspondence courses, night school courses, etc. which in your opinion helps to fit you in addition to your practical experience in the electrical business. Give the name of the school, course of study and copy of the certificate of successful completion if education is to be considered as a substitute for experience.

Length of residence in Maryland _____ Years

Place of birth _____ Date of Birth _____

How many years have you worked as an apprentice? _____ Journeyman? _____

If you have a license from another County or City, please list.

Have you ever had an application rejected in this County? Yes No

Have you ever filed an application in this County before? Yes No

Have you ever been examined by this County for this license before? Yes No

If yes, give dates _____

Have you ever had an electrical license denied or revoked? Yes No

If yes, give details _____

List all employments you have had for the in electrical work, putting your present or last employment first and other in order back to your first position in the electrical business, at least seven (7) years for master general applicants, least 2 years for master limited and one for restricted electrician.

Length of Employment	Worked As	Name of Employer	Address
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____
From _____ to _____	_____	_____	_____

If, upon examination, a license is granted to me, I hereby agree to use it in strict accordance with the laws and regulations of Anne Arundel County and also hereby certify that the statements made by me in the foregoing application are true and correct.

Date Signature of Applicant

STATE OF MARYLAND, ANNE ARUNDEL COUNTY, TO WIT:

I HEREBY CERTIFY, That on this _____ day of _____ 20 _____ before me, the subscriber, a Notary Public in _____ personally appeared _____ and he/she made oath in due form of law that the facts set forth in the foregoing application for examination are true and bona fide to the best of his/her knowledge and belief.

Notary Public

Return Completed Application To Anne Arundel County
Inspections & Permits
License Section MS 6006
2664 Riva Roads
Annapolis, MD 21401

NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT WITHOUT ANY ACTION FROM THIS COUNTY.

----- DO NOT WRITE BELOW THIS LINE -----

APPROVED TO TAKE EXAM _____ EXAM Date _____

DENIED (reason) _____