

**CITY OF MUNCIE
BUILDING COMMISSIONER
MUNCIE, IN
(765) 747-4862**

REQUIREMENTS FOR ELECTRICIAN'S LICENSE

Experior Assessments, LLC (Florida Block Exam)

Letter from where test was taken addressed to: Attn: Electrical Inspector, Ty Goodpaster
or Building Commissioner Office, 300 N. High St., Muncie, IN 47305.

70% or better test score **required.**

5 yrs. experience **required.**

\$5,000 Bond **required.**

Proof of Liability Insurance in the amount \$500,000

Electrical Contractor License Application

FEE: \$150.00 for New License (\$100.00 to Renew)

Licenses are issued January 1st to December 31st

Applicants must appear before the Electrical Review Board which meets on the
last Tuesday of the month at 2:00 p.m. in the City Bldg. Commissioner's Office.

**CITY OF MUNCIE
BUILDING COMMISSIONER
MUNCIE, INDIANA**

ELECTRICAL CONTRACTOR

LICENSE APPLICATION

APPLICANT'S NAME _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____

COMPANY REPRESENTED _____

ADDRESS _____ CITY/ZIP _____

SOLE PROPRIETORSHIP PARTNERSHIP CORPORATION

HOW LONG IN BUSINESS _____ WHAT IS PRIMARY BUSINESS _____

HAVE YOU HELD A LICENSE HERE BEFORE _____

PLEASE ATTACH CERTIFICATE OF INSURANCE, BOND, NUMBER AND COMPANY. CERTIFICATE MUST BE AN ORIGINAL.

GIVE SUMMARY OF YOUR WORK BACKGROUND AND QUALIFICATIONS FOR THE LICENSE APPLIED FOR _____

I acknowledge that all information I have given is complete and accurate and that I have read the City Ordinance and understand it. I agree to allow the Board of Examiners to verify the information I have given to determine my eligibility.

SIGNATURE OF APPLICANT: _____ DATE _____

FOR OFFICIAL USE ONLY

This application was reviewed by the Electrical Review Board on _____

Reason if application denied _____

Applicant may re-apply _____

SIGNED BY _____ Board Member Date _____

LICENSE NUMBER ISSUED TO APPLICANT _____

(rev. 11/08/02)