

CITY OF CHATTANOOGA
BOARD OF ELECTRICAL EXAMINERS

1250 Market Street, Suite 1000
Chattanooga, Tennessee 37402
Phone: (423) 643-5800
FAX: (423) 643-5848

For Board Use Only	
Applicant No.	_____
Date Received	_____
Amt. Received	_____
License Issued	_____
State No.	_____
Test Results	_____
Exam date	_____

I am applying to take the **Examination** for: (Check One)

- Contractor License Amt. \$ 100.00
Type _____
- Journeyman License Amt. \$ 100.00
Type _____

I am applying for a **License** for: (Check One) NOTE: Licenses shall be paid for two year periods.

- | | | | | | |
|---|-----------|--|----------|--|----------|
| <input type="checkbox"/> Class I Contractor | \$ 420.00 | <input type="checkbox"/> Journeyman-Chatt. | \$ 40.00 | <input type="checkbox"/> Journeyman- State | \$ 40.00 |
| <input type="checkbox"/> Class II Contractor | \$ 220.00 | <input type="checkbox"/> Journeyman-Res | \$ 40.00 | | |
| <input type="checkbox"/> Class III Contractor | \$ 120.00 | <input type="checkbox"/> Journeyman-Plant | \$ 40.00 | | |
| <input type="checkbox"/> Plant Master | \$220.00 | <input type="checkbox"/> Journeyman- Sign | \$ 40.00 | | |

NAME: _____

NAME OF BUSINESS: _____

ADDRESS: _____

PHONE NUMBER: _____ CELL NO. _____

STATE OF TENNESSEE CONTRACTOR LICENSE NO. _____

Do you now or have you ever held any license issued by the City of Chattanooga, Board of Electrical Examiners or any other electrical licensing board. List and explain:

EDUCATION & EXPERIENCE

High School (Y/N) _____ Trade School (Y/N) _____

Years of College: _____ Years experience in Electrical Work: _____

Explain schooling and experience related to the license being applied for:

WRITTEN DOCUMENTATION FROM EMPLOYER(S) FOR AT LEAST 3 YEARS WORK EXPERIENCE MUST BE ATTACHED.

1. Present Employer: _____
Address: _____
Phone Number: _____ Name of Supervisor: _____
I have been employed for _____ years. Hire Date: _____
My job title is: _____
My duties are: _____

2. Former Employer: _____
Address: _____
Phone Number: _____ Name of Supervisor: _____
I was employed for _____ years. Hire Date: _____
My job title was: _____
My duties were: _____

3. Former Employer: _____
Address: _____
Phone Number: _____ Name of Supervisor: _____
I was employed for _____ years. Hire Date: _____
My job title was: _____
My duties were: _____

I, the undersigned, affirm that all of the above statements are true and correct. I, the undersigned, affirm that any false statement herein will be just cause for failing to grant my license or to revoke it at any time in the future. I promise to abide by the ordinances, codes, and requirements of the City of Chattanooga in using my license.

Date

Applicant Signature

Return this completed and signed application form along with all of the necessary documentation and a check or money order in the amount of _____ to the City of Chattanooga, 1250 Market Street, Suite 1000, Chattanooga, TN 37402.