



**STATE OF NEW HAMPSHIRE  
ELECTRICIANS' BOARD**

**7 Eagle Square  
Concord, NH 03301**

**603-271-2152 fax-603-271-7928**

<https://www.oplc.nh.gov/electricians/index.htm>

**APPLICATION FOR:**

- CERTIFIED STATEMENT - \$10 FEE**  
 **LOST ID CARD - \$10 FEE**  
 **REPLACEMENT OF PARCHMENT - \$10 FEE**

**Check Payable to 'Treasurer State of NH' (Non-Refundable Fee)**

Name:			Date of Birth:		
Last	First	Middle Initial			
Mailing Address:					
Street		City	State	Zip Code	
E-Mail:			Phone:		
<b><u>NH LICENSE</u></b>					
NH License #:			Master:		
			Journeyman:		
<b><u>CERTIFIED STATEMENT TO RECIPROCATATE TO ANOTHER STATE</u></b>					
What State are you applying to?			Applying for:		
Maine: _____	Massachusetts: _____	Vermont: _____	Master: _____ Journeyman: _____		
<b><u>FOR LOST ID ONLY</u></b>					
ID lost:	ID Stolen:	Approximate Date:			

**Credit Card Sheets are not accepted via e-mail.**

**You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.**

Fax: 603-271-7928

**This page will be destroyed after the transaction has taken place.**

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <b>(required)</b>			
Card Number			<b>(required)</b>
Expiration Date:	Month:	Year:	<b>(required)</b>
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			

Rev. 2/19 Any payment for issued licenses or certifications are non-refundable.