



**State of New Hampshire**  
**OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION**  
**DIVISION OF LICENSING AND BOARD ADMINISTRATION**  
 7 Eagle Square, Concord, NH 03301  
 Phone: 603-271-2152

<https://www.oplc.nh.gov/electricians-board>

**APPLICATION FOR CORPORATION:**

**Check Payable to 'Treasurer State of NH' (Non-Refundable Fee)**  
**\*\*\*SEE WEBSITE FOR FEES\*\*\***

Corporation Number:		New:	Renewal:	
Corporation Name:				
Type:	Electrical:	High Medium Voltage:	Temp Agency:	
Mailing Address:				
Street		City	State	Zip Code
E-Mail:		Phone:		
<b><u>LIST MASTER/HMV IN CHARGE</u> - Signature below must be original</b>				
Full Name:	Address and Phone #:	NH License #:	Full/Part time	# Hours/week
<b>Master/HMV Signature:</b>			<b>Date:</b>	
<ul style="list-style-type: none"> <li>➤ Master or High Medium Voltage (HMV) Electrician may sign above for HMV Corporation</li> <li>➤ Master Electrician <b>must</b> sign above for Electrical Corporation</li> </ul>				
<b><u>LIST DUTIES OF MASTER/HMV ELECTRICIAN</u> - Attach Additional Sheets if Necessary</b>				
<b><u>REGISTRATION WITH THE SECRETARY OF STATE</u></b>				
Is your registration current with the Secretary of State?			Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
<b>A current certificate must accompany application</b>				
I attest that the information contained in this form is true and correct to the best of my knowledge and belief and acknowledge that the provision of false information in the application is a basis for disciplinary action by the Board.				
<b>President/Director/Partner Original Signature</b>		<b>Type or Print Name</b>		<b>Date</b>

Rev. 5/6/22

**Certificates will be emailed to the email listed on this form.**