



**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 FEE \$50.00 FOR NEW:**

**EXAM**     **MASTER**  
                    **JOURNEYMAN**

**RECIPROCAL**     **MASTER**     **JOURNEYMAN**

**NEW**     **HIGH MEDIUM VOLTAGE**

**Check Payable to 'Treasurer State of NH' (Non-Refundable Fee)**  
**SEE ATTACHED FEE SCHEDULE**

Name:			Date of Birth:		
Last	First	Middle Initial	SS #:		
Mailing Address:					
Street		City		State	Zip Code
E-Mail:			Phone:		
Current Position Held:			Current NH License #:		
<b><u>EMPLOYMENT</u></b>					
Employer's Name:					
Employer's Address:					
Street		City		State	Zip Code
Nature of Employer's Business:					
Employer's Phone #:			Date Employment Started:		
<b><u>RECIPROCITY ONLY</u></b>					
State Reciprocating From:			License Number:		
<b>Master and Journeyman – <u>Maine</u>:</b> include a printout from the Board website. <b><u>Massachusetts or Vermont</u>:</b> include a certified statement from that state.					
<b>Journeyman ONLY - <u>Alaska, Arkansas, Colorado, Montana, North Dakota, South Dakota, Utah, Wisconsin, or Wyoming, Iowa</u></b>					

**REFERENCES**

Applicant will give the names and addresses of 3 references of persons unrelated to the applicant who have knowledge of the applicant's professional character per Elec 301.04.

Name:	Address:
Name:	Address:
Name:	Address:

**QUESTIONS**

	Yes	No
1. Have you ever been convicted of any felony criminal convictions that have not been annulled by a court pursuant to RSA 651:5 and if not annulled, please include a written explanation including the Date of the conviction, the nature of the offence, the penalty imposed by the court, including any terms of probation, and any continuing court requirements.	<input type="checkbox"/>	<input type="checkbox"/>
2. Has your electrician's license ever been suspended, revoked, or sanctioned in any jurisdiction, if so, include the name and location of the particular administrative agency, an explanation of the circumstances, date of administrative agency's action, and reason for the administrative agency's action, including whether it was a result of a settlement.	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you licensed as an electrician or a high/medium voltage electrician in another State, if so please name that state: _____	<input type="checkbox"/>	<input type="checkbox"/>

**EDUCATION**

High School / College /Apprentice Program	Name of School	Graduation Date	Diploma/Degree

**PHOTOGRAPH**

Pursuant to Elec 301.04, Attach a **color** photograph of the applicant taken not more than six (6) months prior to the date of the application.

**Date of photo:**

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

<b>Signature of Applicant</b>	<b>Date</b>

[christine.m.horne@oplcnh.gov](mailto:christine.m.horne@oplcnh.gov)

**This Page For Exam Applicants Only –**  
**Professional Experience (make copies as needed)**

**Journeyman:** Verify a minimum of 8000 hours of on-the-job training with a certification for each place of employment in the electrical trade.

**Master:** Verify a minimum of 2000 hours on-the-job training as a licensed journeyman (or licensed master in another state) with a certification for each place of employment in the electrical trade.

1<sup>st</sup> Employer:

<b>Dates of Employment:</b>	<b>Name &amp; address of Employer &amp; Nature of Employer's Business:</b>	<b>Original Signature of Licensed Electrician (print name underneath signature) verifying hours:</b>
<b>Total Number of Hours:</b>	<b>Type of Work Performed &amp; Electrical Installation Duties:</b>	<b>License Number of Electrician above:</b>

2<sup>nd</sup> Employer:

<b>Dates of Employment:</b>	<b>Name &amp; address of Employer &amp; Nature of Employer's Business:</b>	<b>Original Signature of Licensed Electrician (print name underneath signature) verifying hours:</b>
<b>Total Number of Hours:</b>	<b>Type of Work Performed &amp; Electrical Installation Duties:</b>	<b>License Number of Electrician above:</b>

**\*\*RECIPROCAL LICENSEES**

**\*\*INCLUDE A COPY OF YOUR 2017 NEC UPDATE (OR SCHOOLING ON THE 2017 NEC)  
ADD THE \$50 APPLICATION FEE TO THE PRORATED LICENSE FEE BELOW**

**EXAM APPLICANTS**

**ADD \$50 APPLICATION FEE ONLY**

**PAY PRORATED FEE AFTER YOU PASS EXAM**

**2022 PRORATED FEE SCHEDULE FOR NEW LICENSES**

<b><u>BIRTH MONTH</u></b>	<b><u>JOURNEYMAN LICENSE FEE</u></b>	<b><u>EXPIRATION YEAR</u></b>
FEBRUARY, MAY, AUGUST, NOVEMBER	\$100.00	2024
JANUARY, APRIL, JULY, OCTOBER	\$150.00	2025
MARCH, JUNE, SEPTEMBER, DECEMBER	\$50.00	2023

<b><u>MASTER or HIGH MEDIUM VOLTAGE</u></b>		
<b><u>BIRTH MONTH</u></b>	<b><u>LICENSE FEE</u></b>	<b><u>EXPIRATION YEAR</u></b>
FEBRUARY, MAY, AUGUST, NOVEMBER	\$180.00	2024
JANUARY, APRIL, JULY, OCTOBER	\$270.00	2025
MARCH, JUNE, SEPTEMBER, DECEMBER	\$90.00	2023