Submission Requirements For Class C-3 Apprentice Limited Electrical License Application
(NON-TESTED)

You must have a valid State Limited Electrical license prior to making application for a City license.

You must specify the type of limited electrical license you are applying for:

Elevators; Signs; Light Fixtures; HVAC: __________________________________________

APPRENTICE LICENSE APPLICATIONS

1. All applications must be completed on the form provided.

2. Individual Apprentice License Applications must be accompanied by full fees.

3. All apprentices must be working for a properly licensed contractor.

4. Applicants for an electrical apprentice license must first obtain a State electrical apprentice license.

The Contractor Licensing Regulations are attached. It is important that you read and become familiar with them.
CLASS C-3 APPRENTICE LIMITED ELECTRICAL LICENSE APPLICATION
($20) (Non-tested)

INCOMPLETE APPLICATIONS WILL BE REJECTED.

You must have a valid State limited electrical license prior to making application for a City license.

Specify type: Elevators; Signs; Light Fixtures; HVAC: ________________________________

Applicant’s Name: ___________________________ Phone #: (_____) ________
Last First M.I.

Physical Address: __________________________________________________________
Street City State Zip

Mailing Address: __________________________________________________________
Street or P.O. Box City State Zip

Applicant Email Address: ________________________________________________

Applicant is working for: ________________________________________________

Practical Experience
(Refer to submission requirements for additional information).

You must complete the following information in addition to attaching your statement of experience.

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<th>Name &amp; Address of Companies you worked for.</th>
<th>Total Time you worked for them in:</th>
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Personal References
Any individual, other than a relative, who can give you a favorable reference.

Name: ___________________________ Name: ___________________________
Address: ___________________________ Address: ___________________________
City/St/Zip: ___________________________ City/St/Zip: ___________________________
Phone: ___________________________ Phone: ___________________________
**Questionnaire**

1. As the applicant, are you familiar with the Cheyenne Contractor Licensing Regulations and Ordinance that are involved with this type of license and feel that you can comply with them?  Yes_____ No____

2. As the applicant, are you familiar with the applicable Building and Related Codes required to apply for this license?  Yes_____ No____

3. Have you ever had a construction related license in another jurisdiction?  Yes_____ No____
   If yes, list the location and the type of license. (Submit copies of the licenses if you have them.)

4. Have you ever been denied a license?  Yes____ No____
   If yes, state date, reason and jurisdiction of denial.

5. Have you ever had a construction related license suspended or revoked?  Yes____ No____
   If yes, give reason for suspension or revocation date, and jurisdiction.

I, as applicant, hereby certify that the statements in this application are true and correct to the best of my knowledge and belief. I understand that false statements or willful omission of pertinent information will be grounds for denial or revocation of a license.

If, for any reason, you do not obtain a license, you must submit a written request for a refund, within sixty (60) days of the Board’s action or forfeit all fees.

**TO BE SIGNED IN THE PRESENCE OF NOTARY**

Applicant’s Name: 
(Printed):
Applicant’s Signature:

Applicant acknowledges:

a) Receipt of Contractor Licensing Regulations,
b) This license expires one (1) year from date of issue,
c) It is my responsibility to renew this license prior to expiration.

Date:

(Seal)

*******************************************************************************
Office Use Only

Received By: Date:

FEE PAID  [ ]Cash  [ ]Check (No.)  [ ]Credit Card  Amount: Receipt No.:

Approved By: ,Chairman Date:

Rev 02/2020
License Number: __________________________  Date issued: __________________________