

REQUIREMENTS FOR ELECTRICAL EXAMINATION/LICENSURE

APPLICATION FOR EXAMINATION

1. Must be a resident of the Virgin Islands for at least 30 days immediately prior to submitting application for examination.
 2. Must submit 2 letters of professional reference from persons with knowledge of applicant's work in the electrical field and 1 letter of favorable character testimony.
 3. Provide evidence of at least 5 years experience in the electrical trade.
 4. Copy of current registration/licensure.
 5. Copy of certification from Trade School (if applicable).
 6. Fees: \$150.00 (Expedited fee of \$100.00 & Application fee of \$50.00).
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APPLICATION FOR LICENSURE

Upon successful completion of the electrical examination, an applicant must select the level of licensure he/she wishes to pursue.

An applicant for a **Master Electrician's License** must provide the following information to the Board.

1. Completed business application approved by DPNR, FIRE & POLICE.
2. Favorable tax clearance letter from the V.I. Bureau of Internal Revenue.
3. Certificate of Trade Name Registration from the Lieutenant Governor's Office (if applicable).
4. Letter from a financial institution stating that the applicant is in good standing.
5. License fee of \$130.00, which covers licensure for one (1) year from date of issuance.

* A holder of a Master Electrician's License shall not employ more than one full or part-time apprentice or journeyman.

An applicant for an **Electrical Contractor's License** must provide the following information to the Board.

1. Completed business application approved by DPNR, FIRE & POLICE.
 2. Employer Identification Number (EIN).
 3. Favorable tax clearance letter from the V.I. Bureau of Internal Revenue.
 4. Certificate of Trade Name Registration from the Lieutenant Governor's Office (if applicable).
 5. Letter from a financial institution stating the applicant is in good standing.
 6. Proof of Public Liability Insurance.
 7. Workman's Compensation Insurance (if applicable).
 8. License fee of \$130.00, which covers licensure for one (1) year from date of issuance.
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LAW: Title 27 V.I.C. Chapter 7, Section 275 states, "Whoever violates or refuses to comply with any provisions of this chapter or any rules or regulation thereunder shall be fined not more than \$500 for each and every violation or act of non-compliance."



**VIRGIN ISLANDS ELECTRICIANS'
LICENSING BOARD**
Department of Licensing and Consumer Affairs
3000 Golden Rock Shopping Center, Ste. 9
Christiansted, VI 00820-4311
(340) 773-2226
(340) 713-8308 (Fax)

Attach 3
2x2 photos of
Applicant here

APPLICATION FOR EXAMINATION

Part I

In accordance with the provisions of Chapter 7 Title 27, Virgin Islands Code, which regulates Trades & Crafts in the U.S. Virgin Islands, I hereby apply for the following examination:

Electrical Examination	\$ 200.00
Non-Refundable Application Fee	\$ 50.00

- Only the application fee will be accepted at the time application is submitted.

Part II

1. Full Name _____

FirstMiddleLast
2. Physical Address _____
3. Mailing Address _____
4. Business Address _____
5. Business Telephone () _____
6. Home Telephone () _____
7. Birth Date _____
8. Birth Place _____
9. Citizenship _____
10. Naturalized: () yes () no
11. Social Security Number _____ Email Address: _____
12. Virgin Islands Resident? () yes () no If yes, how long? _____
13. Present Business Activity _____

14. In which state(s) do you currently hold registration/licensure: _____

15. Has your license ever been revoked? () yes () no
If yes, please explain: _____

16. Have you ever been censured for unprofessional conduct? () yes () no
If yes, please explain: _____

17. Have you ever been convicted of a felony? () yes () no
If yes, please explain: _____

Part III

18. **REFERENCES:** Please provide two (2) professional references from licensed electricians in the industry and one (1) character reference in the space provided below. Please note that the reference letters must correspond with the names listed below and should be persons other than Board Members and relatives of the applicant.

Name	Address	Telephone Number
1.		
2.		
3.		

Part IV

19. **EDUCATION/TECHNICAL TRAINING:** (Please list in chronological order, beginning with most recent)

Name and Address of Institution	Attendance From To	Technical Course	Graduation	Degree Received

20. **EMPLOYMENT/EXPERIENCE:** (Please list in chronological order your electrical experience for at least 5 years). Use an additional sheet if necessary, following the same format or attach resume.

From	To	Name, Address and Phone # of Employer	Name of Immediate Supervisor	Job Title and Description

All information must be verifiable. Any false information may be reason for denial of application.

Part V

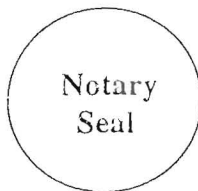
AFFIDAVIT
(Must be completed by all applicants)

State of _____
Territory of _____
Country of _____

I, _____, being duly sworn, depose and say that I am the person who executed the foregoing instrument; that I have read the same and know the contents thereof; that the matters stated therein are true to my knowledge; that I have not suppressed any information that might affect this application; and that I have read and understand this affidavit.

Applicant's Signature

Sworn and Subscribed before me this _____ day of _____, 20_____.



Notary Public

My Commission expires on _____

Do not write below this line:

BOARD DISPOSITION:

Application Approved: (____) YES (____) NO

Signature, Chairman of the Board

Date

Member

Member

Member

Member

Form Lic 1A

Affidavit

United States Virgin Islands

)

SSN: _____

St. Croix, St. Thomas, St. John

)

I, _____ after first being duly sworn, hereby
depose and say:

1. That I am a resident of _____
2. That during the period from _____ to _____ I have
been residing in _____ and have filed
my Federal Income Tax Returns with and paid any taxes due to the United
States Federal Government at the Internal Revenue Service Office in
_____ and to the State of _____.

Or

3. That during the period from _____ to _____
I have been residing in _____ and I was
unemployed or did not have sufficient income to file an Income Tax Return
(mark out the one that does not apply.) If I was a full or part-time student, I
attended _____.

Signature

Subscribed and Sworn before me on this _____ day of _____.

Notary Public

FORM LIC1

GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES
*****0*****
VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
*****0*****
APPLICATION FOR
TAX FILING AND PAYMENT STATUS REPORT-LICENSING

The applicant identified below hereby requests a letter certifying his or her tax filing and payment status for the purpose of receiving a new or renewal license from the Department of Licensing and Consumer Affairs pursuant to Section 101 of Act 5060, codified as Title 27, Section 304, Subchapter (j), Virgin Islands Code. The applicant authorizes the Virgin Islands Bureau of Internal Revenue to disclose any taxpayer information related to this application to the Department of Licensing and Consumer Affairs, who may make such further disclosures as are necessary to carry out the requirements of Act 5060.

1. BUSINESS NAME: _____
2. BUSINESS EIN: _____
3. OWNERS SSN: _____ SPOUSE SSN: _____
4. PLEASE INDICATE: _____ NEW LICENSE _____ RENEWAL
5. _____ SELF-EMPLOYED _____ CORPORATION _____ PARTNERSHIP _____ LLC _____ LLP
6. DO YOU HAVE EMPLOYEES? _____
7. PLEASE CIRCLE FORMS THAT YOU USE:
(1040/8689,1065,1120,941 VI,720VI,720BVI,722VI, OTHER(list) _____
8. DATE BUSINESS STARTED: _____ LICENSE EXPIRATION DATE: _____
9. PERSON REPRESENTING APPLICANT: _____
10. POSITION OF REPRESENTATIVE: _____
11. SIGNATURE: _____
12. MAILING ADDRESS: _____
13. PHYSICAL ADDRESS: _____
14. DATE: _____ TELEPHONE : _____

REPLY TO: 9601 ESTATE THOMAS, ST. THOMAS, VIRGIN ISLANDS 00802
OR 4008 ESTATE DIAMOND, PLOT 7B, CHRISTIANSTED, VIRGIN ISLANDS 00820-4421

[See back of Form for instructions]

Revised 2/2009