



License Number: _____

**Talbot County Planning and Permits Department
Board of Electrical Examiners
215 Bay Street, Suite 2
Easton, Maryland 21601
Phone: 410-770-6840/Fax: 410-770-6842**

Master License Application

Office Use Only:

Application Filing Date: _____ Fee Paid: _____

Check Number: _____ Application Fee \$150.00

After having read the Board's Rules and Regulations, the undersigned hereby make application for an Electrician's License as defined under Chapter 56 of the *Talbot County Code* and the Board's Rules.

The Board now requires a Certificate of Insurance at time of application submittal endorsed to the Talbot County Board of Electrical Examiners showing your name as the insured, not your firm and with the address stated above. In the amounts of at least \$300,000 for General Liability and \$100,000 for Property Damage.

Applicant's Name: _____

Trade Name: _____

Type of Trade: _____

Business Address: _____

Mailing Address: _____

Telephone Number: _____ Cell Number: _____

Email Address: _____ Fax Number: _____

List Names of Co-Partners: _____

Duly incorporated under the laws of the State of: _____

Principal Office being located in: _____

Name of the President: _____

Resident Agent: _____

Affidavit

I do hereby affirm under penalty of perjury that I am in compliance with the Workmen's Compensation Law (Article 101, Section 1 through 102, Annotated Code of Maryland) in that:

- _____ (a) I am not an employer required to provide employee coverage by the Workmen's Compensation Law; or

- _____ (b) I am an employer required to provide employee coverage by the Workmen's Compensation Law and have secured such coverage as evidenced by the Certificate of compliance enclosed herein; or

- _____ (c) I am an employer required to provide employee coverage by the Workmen's Compensation Law and have secured such coverage. As evidence of such coverage, the following is being submitted:

Name of Insurance Company: _____

Policy or Binder Number: _____

Signature

Date

STATE OF MARYLAND, TALBOT COUNTY, TO WIT:

I HEREBY CERTIFY, That on this _____ day of _____, 20__ before me, the Subscriber, a Notary Public in _____ personally appeared _____ And he made oath in due form of law that the facts set forth in the foregoing application for examination are true and bona fide to the best of his knowledge and belief.

NOTARY PUBLIC

Having read the Board's Rules and Regulations, I hereby make application for an Electrician's License as per this application.

Full and accurate answers to the following questions are necessary in order to complete this application.

1. Print Full Name: _____
2. What is your present residence: _____
3. Length of residence in Maryland: _____ Years: _____ Months: _____
4. Place of Birth: _____
5. Date of Birth: _____
6. Have you ever filed an application in Talbot County: _____
7. Do you now hold an electrical license: _____
8. List class of license: _____
9. What counties are your license in: _____
10. Describe any special study, correspondence course, night school courses etc., which, in your opinion, help to fit you in addition to your practical experience in the electrical business:

Applicant's Signature

Date