## **Electrical Apprentice or Fire Alarm Specialty Technician Apprentice**

Michigan Department of Licensing and Regulatory Affairs Bureau of Construction Codes / Licensing Section P.O. Box 30255, Lansing, MI 48909 517-241-9316

www.michigan.gov/bcc

Agency Use Only
ls, services and other reasonable accommodations

Authority: 2016 PA 407
Penalty: Failure to provide the information may result in denial of your request.

LARA is an equal opportunity employer/program. Auxiliary aids, services and ot are available upon request to individuals with disabilities.

Apply and pay online at <a href="https://aca3.accela.com/lara">https://aca3.accela.com/lara</a> OR Mail completed, signed application (2 pages), required documents, & fee to above.
 APPLICANT MUST SIGN THIS DOCUMENT

# THIS FORM IS NOT TO BE USED FOR RENEWAL OF EXISTING LICENSE

### **MILITARY/UNIFORM SERVICE WAIVERS**

#### Fee waiver:

To waive the application fee, you must submit, with the application, proof of active service (i.e.: military ID) OR Proof of dependency (i.e., parent or spouse military ID and birth certificate or marriage certificate & military member papers,)

#### **Examination waiver:**

Licensure without examination is possible IF the applicant:

Provides proof that the applicant is A member of the armed forces or uniformed services, A veteran, or A dependent of a member of the armed forces, a member of the uniformed services, or a veteran **AND** has an active, valid electrical license in at least 1 other state of the United States.

To meet this waiver please complete the MILITARY/UNIFORMED SERVICES EXAMINATION WAIVER FORM (MILITARY EXAMINATION WAIVER PROCEDURE) found at <a href="https://www.michigan.gov/bcc">www.michigan.gov/bcc</a>, Forms, Licensing and attach that to this application.

Please Check One:   Electrical Apprentice  Fire Alarm Specialty Technician Apprentice						
Applicant Information						
NAME (Last Name, First Name, Middle Initial)					SOCIAL SECURITY NUMBER	
ADDRESS	CITY	CITY			TOWNSHIP	
COUNTY	STATE		ZIP CODE		TELEPHONE NUMBER (Include Area Code)	
E-MAIL ADDRESS						
<u> </u> Sponsoring Employer Information - Loc	ally licensed contrac	ctors must provide a	copy of current			
SPONSORING EMPLOYER				CON	ITRACTOR'S LICENSE NUMBER	
HIRE DATE OF APPLICANT		MASTER (62)/ SPECIALITY TECH (52) LICENSE NUMBER				
Certification and Signature of Sponsoring Employer						
<b>Electrical Apprentice</b> : For an electrical apprentice, the sponsoring employer's signature must be either the contractor of record or qualifying master. <b>Fire Alarm Specialty Technician Apprentice</b> : For a fire alarm specialty technician apprentice, the sponsoring employer's signature must be either the contractor of record or qualifying fire alarm specialty technician.						
I certify the information is true and accurate t	o the best of my kno	owledge.				
PRINTED NAME OF SPONSORING EMPLOYER						
SIGNATURE OF SPONSORING EMPLOYER						
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## Certification and Signature of Approved Related Technical Instruction Provider is currently participating in an electrical or fire alarm I certify that training program approved by the Electrical Administrative Board (Printed Name of Applicant) I understand that I am responsible for maintaining a chronological record of my employment as an apprentice and that I must submit proof of my employment when requested by the licensing authority. RELATED TECHNICAL INSTRUCTION PROVIDER (i.e.: college, trade, labor organization etc.) PHONE NUMBER PRINTED NAME OF AUTHORIZED REPRESENTATIVE SIGNATURE OF AUTHORIZED REPRESENTATIVE DATE **Certification and Signature of Applicant** I certify the information provided is true and accurate to the best of my ability. I further understand fraud or deceit in obtaining registration is grounds for administrative action in accordance with the act. APPLICANT'S SIGNATURE DATE **FEE PAYMENT INFORMATION** FOR OFFICE USE ONLY - VALIDATION Pursuant to statute, the license fee must be paid at time of application Make your check or money order payable to: STATE OF MICHIGAN - BCC mail to address above. LICENSE FEE \$ 15.00 (117) ☐ Military/Uniform Services fee/examination waiver. Note: The application fee is waived if the applicant is actively serving, a veteran honorably discharged, or a dependent of an active member or veteran and provides proof. Examination may be waived if applicant meets requirements. See all requirements on page 1.

APPLICANT MUST SIGN THIS DOCUMENT