

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

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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 other reasonable accommodations are available upon request to individuals with disabilities.
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- Apply and pay online at <https://aca3.accela.com/lara> 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 plumbing 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 www.michigan.gov/bcc, 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	TOWNSHIP	
COUNTY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
E-MAIL ADDRESS			

Sponsoring Employer Information - Locally licensed contractors must provide a copy of current license with this application

SPONSORING EMPLOYER		CONTRACTOR'S LICENSE NUMBER
HIRE DATE OF APPLICANT	MASTER (62)/ SPECIALITY TECH (52) LICENSE NUMBER	

Certification and Signature of Sponsoring Employer

Electrical Apprentice: For an electrical apprentice, the sponsoring employer's signature must be either the contractor of record or qualifying master.
Fire Alarm Specialty Technician Apprentice: 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 to the best of my knowledge.

PRINTED NAME OF SPONSORING EMPLOYER

SIGNATURE OF SPONSORING EMPLOYER

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Certification and Signature of Approved Related Technical Instruction Provider

I certify that _____ is currently participating in an electrical or fire alarm 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
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FEE PAYMENT INFORMATION	FOR OFFICE USE ONLY - VALIDATION
<p>Pursuant to statute, the license fee must be paid at time of application <u>Make your check or money order payable to:</u> STATE OF MICHIGAN – BCC mail to address above. LICENSE FEE \$ 15.00 (117)</p> <p><input type="checkbox"/> 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.</p> <p>APPLICANT MUST SIGN THIS DOCUMENT</p>	