

Application for Electrical Apprentice or Fire Alarm Specialty Technician Apprentice

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

www.michigan.gov/bcc

Agency Use Only

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Authority: 1956 PA 217 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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Note: In accordance with 2012 PA 313, any veteran providing satisfactory proof of separation from the armed forces of the United States under “honorable” or “general under honorable conditions” is exempt from registration, licensing and examination fees. For consideration, please attach a copy of either a DD-214, and/or DD-215 to your application. You may email your application and documentation to lara-bcc-licensing@michigan.gov if you are requesting a veterans exemption only.

General Instructions:

- Enclose a check made payable to the **State of Michigan**.
- Mail completed application and payment to the address listed above.

<input type="checkbox"/> \$15.00 Fee Enclosed	<input type="checkbox"/> No Fee - Request for veterans exemption (Copy of DD-214 or DD-215 enclosed)
Please Check One: <input type="checkbox"/> Electrical Apprentice <input type="checkbox"/> 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		QUALIFYING INDIVIDUALS LICENSE NUMBER

Certification and Signature of Sponsoring Employer

<p>Electrical Apprentice: For an electrical apprentice, the sponsoring employer's signature must be either the contractor of record or qualifying master.</p> <p>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.</p>
I certify the information is true and accurate to the best of my knowledge.
PRINTED NAME OF SPONSORING EMPLOYER
SIGNATURE OF SPONSORING EMPLOYER

Certification and Signature of Approved Related Technical Instruction Provider

I certify that _____ is currently participating in an electrical or fire alarm (Printed Name of Applicant)		
training program approved by the Electrical Administrative Board.		
RELATED TECHNICAL INSTRUCTION PROVIDER (e.g. college, trade, labor organization etc.)	PHONE NUMBER	
PRINTED NAME OF AUTHORIZED REPRESENTATIVE	SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE

I understand that I am responsible for maintaining a chronological record of my employment as an electrical apprentice or fire alarm specialty technician apprentice and that I must submit proof of my employment when requested by the licensing authority.

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