

Electrical Licensing and Certification
PO Box 44460
Olympia WA 98504-4460
www.Lni.wa.gov/Electrical

Attached is the State of Washington application for the journey level or specialty electrician's certificate examination. To avoid delays in the processing of your application, please ensure that you have included all of the items on the checklist provided below. *Applications received without all the information will be denied.*

- Complete the entire application including the work history portion.
- Date and sign the application in the **Applicant's Signature** block.
- Include the \$90.00 fee. Make checks payable to: **Department of Labor and Industries.**
- Supply original **Affidavits of Experience** unless already on file with the Department.

Notes:

- Verification of your experience must be submitted on an **Affidavit of Experience** form and must be **notarized**. The Affidavits of Experience form must be completed by:
 - An authorized representative for the electrical contractor *or*
 - Your Training Director if you are enrolled in a formal apprenticeship program.
- See [RCW 19.28](#) and [WAC 296-46B-945](#) for additional information on qualifying for the Washington electrician examination.
- To be accepted, all experience must have been legally obtained under the requirements of [RCW 19.28](#) or as required in the state where the electrical work was performed. See [WAC 296-46B-945](#).
- No self-verification of electrical training experience will be accepted.
- Washington hours will not be credited if you did not have a current electrical training certificate. [RCW 19.28.161\(2\)](#) is very clear that you must have an electrical training certificate to learn the electrical trade.
- All General Journey level applicants must have 8,000 hours of experience with at least 4,000 of that being in new commercial/industrial installation.
- All Residential, Pump & Irrigation, Sign, Limited Energy, HVAC/Refrigeration, and Nonresidential Maintenance Specialty Electrician applicants must have 4,000 hours of experience in the appropriate specialty.
- All Domestic Well, HVAC/Refrigeration – Restricted, Nonresidential Lighting Maintenance & Retrofit, Residential Maintenance, Restricted Nonresidential Maintenance, Appliance Repair, Equipment Repair, and Door, Gate, & Similar Systems Specialty Electrician applicants must have 2,000 hours of experience in the appropriate specialty. (See [WAC 296-46B-945](#) & Table 945-1 for important information.)
- Out of state electricians must provide evidence that they meet the requirements of RCW 19.28.191 and provide evidence of that as defined in WAC 296-46B-945. Please contact Electrical Licensing at 360-902-5269 **before** coming to Washington to get details about what is acceptable evidence of experience. You should send the completed application, fee, and evidence of experience via express mail. Then if approved, you should take the exam before coming to Washington. Waiting to do any of the above until you have arrived in Washington may delay your ability to quickly go to work as an electrician.
- You will be notified by mail if your application is approved or denied. If your application is approved, the department will mail your approval letter with the contact information for the exam contractor. A separate fee scheduling your examination must be paid directly to the exam contractor. You will be responsible for scheduling your examination with the exam contractor. You can obtain information to study for the examination on the electrical website under Exam Information.
- Allow at least 4 weeks processing time under normal circumstances.
- Once you successfully pass the examination the department will mail your certificate to you within approximately 2 – 4 weeks.
- You must keep you electrical training certificate current until you pass the examination. If you take and pass a specialty electrician examination, you will also need to maintain your electrical training certificate if you work outside the scope of that specialty. (Example: You have a residential electrician certificate but you want to work on a commercial job; you must have an electrical training certificate and work under the proper supervision.)

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Enclose a check or money order payable to Department of Labor and Industries for \$90.00.

Note: A separate fee for administering the examination must be paid directly to the exam contractor.

Applicant Information

Name (Last, First, Middle Initial)			Date of Birth
Mailing Address			Social Security Number (<i>for ID only</i>)
City	State	Zip Code	Daytime Phone (<i>include area code</i>)
Join the Electrical listserv for email updates and notices by giving your email address here			

I am applying for the Electrical Examination for the certificate type checked below:

(See [WAC 296-46B-920](#) for scope-of-work details)

- | | |
|---|---|
| <input type="checkbox"/> (01) General | <input type="checkbox"/> (07) Nonresidential Maintenance |
| <input type="checkbox"/> (02) Residential | <input type="checkbox"/> (07A) Nonresidential Lighting Maintenance & Retrofit |
| <input type="checkbox"/> (03) Pump and Irrigation | <input type="checkbox"/> (07B) Residential Maintenance |
| <input type="checkbox"/> (03A) Domestic Well | <input type="checkbox"/> (07C) Restricted Nonresidential Maintenance |
| <input type="checkbox"/> (04) Signs | <input type="checkbox"/> (07D) Appliance Repair |
| <input type="checkbox"/> (06) Limited Energy System | <input type="checkbox"/> (07E) Equipment Repair |
| <input type="checkbox"/> (06A) HVAC/Refrigeration Limited Energy System | <input type="checkbox"/> (10) Door, Gate, and Similar Systems |
| <input type="checkbox"/> (06B) HVAC/Refrigeration – Restricted | |

Select “Yes” or “No” to the following questions:

Have you previously been a certified electrician or trainee with this agency? Yes No

Is this your first application for an electrician exam certificate with this agency? Yes No

Are all of your affidavits of experience already on file with the department?

Yes — you do not have to submit additional affidavits of experience.

No — you must submit additional affidavits of experience.

All applications and documents submitted must be originals and become the property of the department.

Employment History

Name of Employer	Start Date	End Date
Address	City	State Zip Code
Position – Job Duties		

Name of Employer	Start Date	End Date
Address	City	State Zip Code
Position – Job Duties		

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant's Signature Date

For L&I Use Only

Approved:						
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reason Code	Cross-Ref with Prev. Certificate #	A/C	Initials	Date
<input type="checkbox"/> E	<input type="checkbox"/> R					

Affidavit of Experience for 75% Supervision Specialties

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(Time frame cannot exceed 24 months per affidavit)

Update Fee of \$53.40 required if not submitted with renewal

Please read this information before completing the affidavit form.

- There can be no errors, whiteouts, alternations, or additions on this form. You must submit the original copy. Please print clearly.
- The department cannot credit hours worked during any times that the electrical training certificate or electrical contractor license were not active. Don't report any such hours on the affidavit. Each time frame requires a separate affidavit.
- An affidavit needs to be filled out for each continuous time frame of hours worked. If the trainee stops doing electrical work for any period of time, that time frame ends and a new begins. Each time frame requires a separate affidavit.
- See [WAC 296-45B-290](#) about scope-of-work for electrical specialties. All training hours must be separated and submitted in the proper category.
- Work in the specialty categories requires supervision by a journey level or specialty electrician in a ratio to 1 electrician to 2 trainees.
- If the experience is from out of state, you must provide verification of your experience as defined in [WAC 296-46B-945\(7-10\)](#).
- Electrical training hours gained in specialties requiring less than 4,000 (2 years) for certification may not be credited toward qualification for journey level electrician. See [WAC 296-46B Table 945-1](#) for detail.

Affidavit of Experience for 75% Supervision Specialties

I, _____ affirm and certify that
Print name of Administrator/Master Electrician, Authorized Electrical Contractor's Representative or Approved Training Director

_____ has worked in Washington as an employee of
Print Name of Trainee *Training Certificate or Social Security Number*

_____ performing electrical installations inspected
Print Name of Company or Training Program *UBI or License Number*

under RCW 19.28 continuously from _____ to _____
Month Day Year *Month Day Year*

with 75% direct supervision under a Washington certified journey level, master, or specialty electrician, in the category and number of hours below.

Hours	Category		Hours	Category
_____	(01) General Commercial/New Industrial		_____	(06) Limited Energy System
_____	(02) Residential		_____	(06A) HVAC/Refrigeration Limited Energy
_____	(03) Pump and Irrigation		_____	(07) Nonresidential Maintenance
_____	(04) Signs			

Signature — Sign in the presence of a notary

I hereby certify that the information on this affidavit is true and accurate. I acknowledge that the department may issue citations for false statements or material misrepresentation per RCW 19.28 and WAC 296-46B.

Signature of Administrator/Master Electrician, Authorized Electrical Contractor's or Approved Training Director *Date*

Subscribed and sworn to before me this date
Notary public signature
For the state of
Residing at
Title
My commission expires

Notary Seal or Stamp

I hereby certify that the information on this affidavit is true and accurate and request that these hours be credited to my electrical training file. I acknowledge that the department may deny this affidavit, issue citation, and subtract up to 2000 hours from my total hours of experience, if I make a false statement or misrepresent the hours on this affidavit per RCW 19.28 and WAC 296-46B.

Signature of the Applicant *Date*

Subscribed and sworn to before me this date
Notary public signature
For the state of
Residing at
Title
My commission expires

Notary Seal or Stamp

For L&I Use Only

Approved:						
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reason Code	Lapse From	Lapse To	A/C	Initials Date

Affidavit of Experience for 100% Supervision Specialties

(Time frame cannot exceed 24 months per affidavit)

Update Fee of \$53.40 required if not submitted with renewal

Please read this information before completing the affidavit form.

- There can be no errors, whiteouts, alternations, or additions on this form. You must submit the original copy. Please print clearly.
- The department cannot credit hours worked during any times that the electrical training certificate or electrical contractor license were not active. Don't report any such hours on the affidavit. Each time frame requires a separate affidavit.
- An affidavit needs to be filled out for each continuous time frame of hours worked. If the trainee stops doing electrical work for any period of time, that time frame ends and a new begins. Each time frame requires a separate affidavit.
- See [WAC 296-45B-290](#) about scope-of-work for electrical specialties. All training hours must be separated and submitted in the proper category.
- Work in the specialty categories requires supervision by a journey level or specialty electrician in a ratio to 1 electrician to 2 trainees.
- If the experience is from out of state, you must provide verification of your experience as defined in [WAC 296-46B-945\(7-10\)](#).
- Electrical training hours gained in specialties requiring less than 4,000 (2 years) for certification may not be credited toward qualification for journey level electrician. See [WAC 296-46B Table 945-1](#) for detail.

Affidavit of Experience for 100% Supervision Specialties

I, _____ affirm and certify that
Print name of Administrator/Master Electrician, Authorized Electrical Contractor's Representative or Approved Training Director

_____ has worked in Washington as an employee of
Print Name of Trainee *Training Certificate or Social Security Number*

_____ performing electrical installations inspected
Print Name of Company or Training Program *UBI or License Number*

under RCW 19.28 continuously from _____ to _____
Month Day Year *Month Day Year*

with 100% direct supervision under a Washington certified journey level, master, or specialty electrician, in the category and number of hours below.

Hours	Category	Hours	Category
_____	(03A) Domestic Well	_____	(07C) Restricted Non-Residential Maintenance
_____	(6B) HVAC/Refrigeration – Restricted	_____	(07D) Appliance Repair
_____	(07A) Non-Residential Lighting Maintenance	_____	(07E) Equipment Repair
_____	(07B) Residential Maintenance	_____	(10) Door, Gate, and Similar Systems

Signature — Sign in the presence of a notary

I hereby certify that the information on this affidavit is true and accurate. I acknowledge that the department may issue citations for false statements or material misrepresentation per RCW 19.28 and WAC 296-46B.

Signature of Administrator/Master Electrician, Authorized Electrical Contractor's or Approved Training Director *Date*

Subscribed and sworn to before me this date
Notary public signature
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I hereby certify that the information on this affidavit is true and accurate and request that these hours be credited to my electrical training file. I acknowledge that the department may deny this affidavit, issue citation, and subtract up to 2000 hours from my total hours of experience, if I make a false statement or misrepresent the hours on this affidavit per RCW 19.28 and WAC 296-46B.

Signature of the Applicant *Date*

Subscribed and sworn to before me this date
Notary public signature
For the state of
Residing at
Title
My commission expires

Notary Seal or Stamp

For L&I Use Only

Approved:

Yes No *Reason Code* *Lapse From* *Lapse To* *A/C* *Initials* *Date*