



DEPARTMENT OF CONSUMER AFFAIRS AND WEIGHTS & MEASURES

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INSTRUCTIONS for filing an application for consideration to take the ORANGE COUNTY ELECTRICIAN EXAM

According to Local Law #8 of 2007, any person wishing to work as an electrician in Orange County must possess a county-issued license.

1. Submit a completed application and child support form signed in **BLUE** ink.
2. Include two passport photos taken within thirty (30) days of submission of the application.
3. Provide proof of experience as set forth in Local Law #8. You must prove seven years electrical experience as your main source of income to be eligible for the exam, using any combination of the following and

Must include choices from A - F

- A. **W-2 FORMS**
- B. **1040 FORMS**
- C. **BUSINESS TAX STATEMENTS**
- D. **NOTARIZED BUSINESS RECORDS**
- E. **NOTARIZED STATEMENTS OF HOURS WORKED FROM BENEFIT FUNDS ON FUND LETTERHEAD**
- F. **SOCIAL SECURITY RECORDS**

- G. NOTARIZED STATEMENTS AND LETTERS FROM EMPLOYERS ON COMPANY LETTERHEAD
- H. CERTIFIED COPIES OF LICENSES HELD
- I. NOTARIZED LETTER(S) FROM ONE OR MORE LICENSED ELECTRICIANS, ON COMPANY LETTERHEAD, CONFIRMING THAT THE APPLICANT WAS EMPLOYED IN THE CAPACITY OF JOURNEYMAN ELECTRICIAN AND THE NUMBER OF YEARS THE APPLICANT WAS SO EMPLOYED. THE LETTER SHALL INCLUDE THE LICENSE NUMBER OF THE EMPLOYER AND WHERE THE LICENSE WAS ISSUED

After passing the exam you will be required to submit the following:

1. Liability Insurance accord in the amounts: one million over two million, Workman's Compensation Insurance, Disability Insurance and any other insurance applicable under New York State Law. Orange County must be named as a certificate holder.
2. A license fee according to the schedule:
Orange County residents - \$500.00
New York State residents - \$750.00
Non-residents of New York - \$1500.00

Fee must be in the form of a non-refundable check or money order made payable to Orange County Commissioner of Finance.

ORANGE COUNTY ELECTRICIAN LICENSE
Application for consideration to take the exam

OC Dept of Consumer Affairs and Weights & Measures, 255 Main Street, Goshen, NY 10924

According to Local Law #8 of 2007, any person wishing to work as an electrician in Orange County must possess a county-issued license.

1. Person NAME / Last/First: _____

2. DBA / Business Name: _____

3. ADDRESS: BUSINESS: _____

HOME: _____

Email address: _____

4. TELEPHONE: BUSINESS: _____ HOME: _____

CELL: _____

5. SOCIAL SECURITY NUMBER: _____

6. DATE OF BIRTH: _____

7. ARE YOU REQUIRED TO MAKE CHILD SUPPORT PAYMENTS? _____

(WHETHER YES OR NO, CHILD SUPPORT FORM MUST BE FILLED OUT)

BY SIGNING BELOW, THE APPLICANT UNDERSTANDS THAT SUCH APPLICATION IS MADE UNDER PENALTIES OF PERJURY AND FURTHER ATTESTS THAT ALL THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND ANY FALSE OR MISLEADING INFORMATION IS PUNISHABLE AS A CLASS "A" MISDEMEANOR, SECTION 175.30 AND/OR SECTION 210.45 OF THE PENAL LAW AND SHALL MAKE THE APPLICATION NULL AND VOID.

BY SIGNING BELOW, THE APPLICANT AUTHORIZES THE COUNTY OF ORANGE AND THE ELECTRICAL LICENSING BOARD OF THE COUNTY OF ORANGE TO INVESTIGATE THE FACTS SET FORTH IN THE APPLICATION AS REQUIRED TO MAKE A DETERMINATION AS TO THE PERSON'S QUALIFICATIONS FOR AN ELECTRICAL LICENSE.

SIGNATURE _____ DATE _____

* NEW YORK STATE GENERAL OBLIGATION LAW SECTION 3-503 REQUIRES THAT THE ATTACHED DOCUMENT RELATING TO CHILD SUPPORT BE FILLED OUT AND NOTARIZED. *

THE INTENTIONAL SUBMISSION OF FALSE WRITTEN STATEMENTS FOR THE PURPOSE OF FRUSTRATING OR DEFEATING PAYMENT OF SUPPORT IS PUNISHABLE PURSUANT TO SECTION 175.35 OF THE PENAL LAW. PERSONS WHO ARE FOUR MONTHS OR MORE IN ARREARS IN CHILD SUPPORT MAY BE SUBJECT TO SUSPENSION OF THEIR BUSINESS, PROFESSIONAL AND DRIVER'S LICENSE.

CHILD SUPPORT CERTIFICATION
County of Orange Electrical Licensing Board

LICENSE BEING APPLIED FOR

E L E C T R I C I A N

THIS FORM MUST BE FULLY COMPLETED BY EACH APPLICANT FOR A PPLICATION TO BE VALID

Last Name _____
First Name _____
Social Security Number _____ - _____ - _____
Date of Birth _____ / _____ / _____ Month Day Year
Home Address _____
City _____ State _____ Zip _____

I, _____ being duly sworn, make the following statement:

- I am **NOT** under a court or administrative order to pay child support, **OR**
- I am under an obligation to pay child support. My child support account number is _____
- County _____ State _____

If you choose the second above, put an "X" in front of the applicable statement:

- I do not owe arrears equal to 4 months or more of child support payments
- I have arrears equal to 4 or more months of child support payments, and one of the following statements applies to me (check the appropriate box)
 - I am making payments by income execution or by court agreed payment/re-payment plan or by a plan agreed to by the parties.
 - My child support obligation is the subject of a pending court proceeding
- I have arrears equal to 4 months or more of child support payment and none of the above statements apply to me# _____
- I have arrears equal to four months or more of child support payment and none of the above statements apply to me.

I hereby do solemnly swear that the information provided by me in this certificate is true and accurate to the best of my knowledge. I acknowledge that this statement is under oath.

Sworn before me this _____ day _____

Of _____

Signature

Notary Public, State of New York

Date