

DAVID R. CRAIG
HARFORD COUNTY EXECUTIVE



MARY F. CHANCE
DIRECTOR OF ADMINISTRATION



Richard D. Lynch
DIRECTOR, DEPARTMENT OF INSPECTIONS,
LICENSES AND PERMITS

Milford L. Badders
CHIEF, ELECTRICAL SERVICES DIVISION

HARFORD COUNTY GOVERNMENT

**HARFORD COUNTY ELECTRICAL BOARD
APPLICATION FOR ELECTRICIAN'S EXAMINATION
EXAMINATION FEE - \$30**

I HEREBY MAKE APPLICATION FOR A _____ ELECTRICIAN'S EXAMINATION.

Name _____ Date of Birth _____

Address _____

Telephone _____

Have you previously filed for a Harford County electrician's exam? _____

If so, how many times have you taken the exam? _____

Name and describe courses you have taken that would apply to your practical experience:

ON THE ATTACHED FORM list your employment history you have had in the electrical industry, beginning with the most recent employer. Each employer must be documented separately. **(This form can be copied as often as needed.)**

APPLICANT'S SIGNATURE: _____

DATE: _____

STATE OF MARYLAND, HARFORD COUNTY, TO WIT:

I HEREBY CERTIFY, THAT ON THIS _____ DAY OF _____ 20_____

BEFORE ME, THE SUBSCRIBER, A NOTARY PUBLIC IN _____

PERSONALLY APPEARED _____ AND MADE OATH IN DUE FORM OF LAW

THAT THE FACTS SET FORTH IN THE FOREGOING _____

APPLICATION FOR EXAMINATION ARE TRUE AND BONA FIDE TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

NOTARY PUBLIC _____

MY COMMISSION EXPIRES: _____

Rev. 2-11

I, _____ Representing _____
Company, verify by my signature that _____ worked under
my supervision as an employee of the above company in the time period specified below.

YEAR WORKED	NUMBER OF MONTHS WORKED

SIGNATURE: _____
MASTER LICENSE NUMBER: _____
LICENSE LOCATION: _____

I, _____ Representing _____
Company, verify by my signature that _____ worked under
my supervision as an employee of the above company in the time period specified below.

YEAR WORKED	NUMBER OF MONTHS WORKED

SIGNATURE: _____
MASTER LICENSE NUMBER: _____
LICENSE LOCATION: _____

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