



Instructions For Completing
**Application for
Electrical Contractor's License**

Submit all items as a complete package or we will be unable to process your application. The business name must be *exactly the same on all documents*.

A complete **Application for Electrical Contractor's License** includes:

1. The application must be filled out *completely* including:
 - a. **Uniform Business Identifier (UBI) number.** Issued by the [Business Licensing Service](#) of the [Department of Revenue](#). You will also need this number to obtain a bond.
 - b. **Corporation, Limited Liability Corporation (LLC) or Limited Liability Partnership (LLP):** You must be properly registered with the State of Washington [Secretary of State Corporations Division](#) (this includes corporations from out-of-state). If you change corporate officers, you must *officially* notify the Secretary of State Corporations Division *and* supply written notification to the Labor and Industries Electrical Licensing Section. Failure to notify both parties could delay your company's ability to buy permits and request inspections.
 - c. **Application fees: \$306.10** (Electrical Contractor \$266.20 Administrator/Master Assignment \$39.90).
 - d. **Industrial Insurance Account Number:** If you have employees or plan to hire employees, you must provide the # from Labor and Industries, Industrial Insurance Division.
2. **Designated Administrator or Master Electrician:** Complete the [Assignment/unassignment of Administrator/Master Certificate](#) form and submit with the electrical contractor application (fee is included in the above \$306.10). Only one administrator/master can be *assigned* to the business at a time. The administrator/master must either be an owner/principle or a supervisory employee who agrees to perform the duties of the administrator/master as detailed in RCW 19.28.061.
3. **Electrical/Telecommunications Contractor's Bond to the State of Washington** form [F500-019-000](#) (see instructions under 3a)

Or

Electrical/Telecommunications Contractor Assignment of Savings Account form [F500-020-000](#) (see instructions under 3b)

- a. The **Bond** (submit original only, no copies) must:
 - Be completed (typed) by your bonding agent and *must* include the effective date, *the bonding company representative's signature*, the seal of the bonding company and power of attorney.
 - Have no errors, whiteouts, alterations or additions on the form.
 - State the name of the principal, partners, or corporation and the business name of the contracting company. The business name must *exactly* match the business name listed on the application. (See ****NOTE****)
- b. In lieu of a bond, you may submit an **Assignment of Savings Account**. The Assignment of Savings Account (submit original only, no copies) must:
 - Be completed (typed) by your financial institutions authorized representative and that person's signature *must be notarized*.
 - This saving account assignment must be for the sum of \$4,000 to the State of Washington. These funds cannot be released to anyone until 1 year after the contractor's license is expired, revoked, or the owner notified the department in writing that the company is no longer doing electrical contracting business in the state of Washington providing there is no pending legal action.
 - Have no errors, whiteouts, alterations or additions on the form.
 - State the name of the principal, partners, or corporation and the business name of the contracting company. The business name must match *exactly* the business name listed on the application. (See ****NOTE****)

****NOTE****

- Individual Proprietorship example:
Mark Jones (principal), DBA Jones Communications (business name).
- Partnership example:
John Smith and Henry Jones (principals), DBA Smith and Jones Cabling (business name).
- Corporation, LLC, or LLP example:
Empire Corporation (principal), registered trade name: Network Communications (business name).

The Types of Electrical Contractor License are (see [WAC 296-46B-920](#) for specific details):

General electrical (01): Encompasses all types of electrical installations.

Residential (02): Limited to the wiring of one and two family dwellings, or multifamily dwellings not exceeding three floors above grade. All wiring is limited to nonmetallic-sheathed cable.

Pump and irrigation (03): Limited to pumps and irrigating systems.

Domestic well (03A): Limited to residential water pump controls for pumps that do not exceed 7 1/2 horsepower at 230 volts AC single phase.

Signs (04): Limited to placement and connection of electric signs and outline lighting.

Limited energy system (06): This specialty is restricted to low-voltage circuits including fire protection signaling systems, intrusion alarms, amplified sound, and similar limited energy systems.

HVAC/refrigeration limited energy system (06A): Limited to the installation of low-voltage controls for and repair of HVAC or refrigeration equipment.

HVAC/refrigeration – Restricted (06B): Limited to the installation, maintenance and repair of low voltage class 2 HVAC/R controls and cables; and internal line voltage components for furnaces, heat pumps and similar HVAC/R equipment supplied by a circuit not to exceed 250 volt 120 amp single phase.

Nonresidential maintenance (07): Limited to maintenance, repair and replacement of existing electrical equipment and conductors on industrial or commercial premises.

Nonresidential lighting maintenance and lighting retrofit (07A): Limited to working within the housing of existing nonresidential lighting fixtures for maintenance, repair, retrofit upgrades.

Residential maintenance (07B): This specialty is limited to maintenance, repair, or replacement of existing lighting fixtures, ranges, electric heaters, and similar appliances in residential dwellings.

Restricted Nonresidential maintenance (07C): Limited to the maintenance, repair, or replacement of existing luminaires, or appliances operating at a maximum of 250 volts, 60 amperes, single phase, or 277 volts, 20 amps for lighting branch circuits only.

Appliance Repair (07D): Restricted to servicing, maintaining, repairing or replacing household appliances, small commercial/industrial appliances and other small utilization equipment that operates at a maximum of 250 volts, 60 amperes, single phase.

Equipment Repair (07E) Restricted to servicing, maintaining, repairing, or replacing utilization equipment that is connected as a single unit to a single source of electrical power limited to a maximum of 600 volts.

Door, gate, and similar systems (10): Limited to the installation of electric gates, doors, windows, awnings, movable partitions, curtains and similar systems. Circuits from controller to equipment only.

NOTE: If you are doing other non-electrical type work you may also need to be registered with the [Contractor Registration Section](#) as well. For more information see [RCW 18.27](#) or contact them at 360-902-5226.

Visit our website at www.Lni.wa.gov for more information and services, such as:

- Internet access for **licensed contractors** to purchase permits on-line using Electronic Permits Inspection Services. Go to www.lni.wa.gov/forms/pdf/500055af.pdf to download the application.
- You can renew your electrical license or certificate at Licensing.Lni.wa.gov. (Credit card payment required)
- Go to Contractors.Lni.wa.gov to check status of a license for a company or person.
- Obtain the electrical laws and rules, chapter 19.28 RCW and 296-46B WAC by clicking on [Electrical rules, policies & laws](#).
- Easily keep informed about the electrical industry in Washington and receive automatic e-mail notices, by joining the electrical listserv at <http://listserv.wa.gov/archives/electrical.html> then click “join or leave the list”.

Mail Application and Fee To:
 Department of Labor and Industries
 Electrical Program
 PO Box 44460
 Olympia, WA 98504-4460
 www.Lni.wa.gov



Application for Electrical Contractor's License

Mail a check or money order payable to the
 Department of Labor and Industries for **\$306.10**

Electrical Contractor License \$266.20 GL 1450
 Administrator/Master Assignment \$39.90 GL 1555
TOTAL DUE \$306.10

Business Name <i>(limited to 30 characters - if more than 30 characters, name will be abbreviated)</i>		Phone <i>(include area code)</i>	
Business Mailing Address	City	State	Zip Code
Name of <i>Designated Administrator/Master</i> to be assigned to this business		UBI Number	

Indicate your business structure (check one)

- Individual Proprietorship
 Corporation
 Partnership
 Limited Liability Corporation (LLC)
 Limited Liability Partnership (LLP)

Check the type of electrical contractor's license you are applying for (check one): *(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 and 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.

- Are you currently licensed as an electrical contractor with this agency? _____ Yes No
- If yes, enter your previous license #: _____
- Do you want your previous license placed in relicensed status? _____ Yes No
- Do you want your previous license maintained as a separate license? _____ Yes No
- Do you currently utilize contractor deposit (CD) accounts? _____ Yes No
- If yes, do you want to transfer any remaining funds in the account to the new license? _____ Yes No
- Will you use the Electrical Internet services? _____ Yes No
- Do you plan to hire or do you have employees? _____ Yes No
- If yes, you must enter your Industrial Insurance Account #: _____

Applicant's Name (Print)
Applicant's Fax Number <i>(include area code)</i>

Applicant's Signature
Email address

FOR AGENCY USE ONLY				
SPEC CODE	Effective Date	Expiration Date	License Number Issued	Processors Initials
<input type="checkbox"/>	mo day year	mo day year	Administrator/Master Certificate #	Cross Reference With
	Date Processed			
Processed through the Email box? <input type="checkbox"/> Yes <input type="checkbox"/> No				

You must complete the “Business Type” information on this or the following pages. Only select one Business Type.

Business Type: (Check one only)

Individual Proprietorship (Name of the individual, not the business name)

Name (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code

Partnership (Names of each partner)

1 st Partner Name (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
2 nd Partner Name (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
3 rd Partner Name (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code

Corporation

Names must match those listed with the Corporate Division in the Office of the Secretary of State (SOS). If you change corporate officers, you must **officially** notify the Office of the SOS. Electrical Licensing & Certification must also be officially notified either by letter or contractor renewal notice submitted **after** the change is recorded by the SOS.

All corporations and limited liability companies, and out of state limited liability partnerships doing business in Washington must have a registered agent with a Washington State address. The registered agent may be an individual or any other organization registered by the SOS to do business in Washington.

Name of Corporation	Federal Tax Identification Number	Phone (<i>include area code</i>)	
Mailing Address of Principal Office	City	State	Zip Code
Registered Agent (<i>Last name, First Name, Middle Initial</i>)	Social Security/UBI Number	Phone (<i>include area code</i>)	
Physical Address (<i>Not a PO Box</i>)	City	State	Zip Code
President (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Vice President (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Secretary (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Treasurer (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code

LLC LLP

Names must match those listed with the Corporate Division in the Office of the Secretary of State(SOS). If you change corporate officers, you must **officially** notify the SOS. Electrical Licensing & Certification must also be officially notified either by letter or contractor renewal notice submitted **after** the change is recorded by the SOS.

Name of Corporation, LLC, or LLP	Federal Tax Identification Number	Phone (<i>include area code</i>)	
Mailing Address of Principal Office	City	State	Zip Code
Registered Agent (<i>Last name, first name, middle initial</i>)	Social Security/UBI Number	Phone (<i>include area code</i>)	
Physical Address (<u>Not a PO Box</u>)	City	State	Zip Code
Member (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Member (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Member (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code
Member (<i>Last name, first name, middle initial</i>)	Social Security Number	Phone (<i>include area code</i>)	
Mailing Address	City	State	Zip Code

***If you have any questions, please contact the Department of Labor and Industries
Tumwater office at (360) 902-5269.***