



West Virginia State Fire Marshal's Office  
Regulatory & Licensing Division

Electrical Inspector Application

WV State Fire Marshal's Office  
Regulatory and Licensing  
1700 MacCorkle Ave SE, 4<sup>th</sup> Floor North  
Charleston, WV 25314  
Phone: (304) 558-2191

Updated 09/2023



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[www.firemarshal.wv.gov](http://www.firemarshal.wv.gov)

### INSTRUCTIONS AND APPLICATION FORM FOR THE WEST VIRGINIA ELECTRICAL INSPECTOR CERTIFICATION

- Include your completed legible application form.
- Include a copy of your valid West Virginia Master Electrician License.
- Include Certificate of Passing the applicable National Certification for Construction Code Inspectors:
  - Inspector - Class A – Residential Only: Test E1
  - Inspector - Class B – All Structures: Test E1 & E2
  - Inspector - Class C – All Structures + Plans Review: Test E1 & E2 & E3
- Exam Administrator:
  - International Code Council – 1-888-ICC-SAFE (422-7233); website [www.iccsafe.org](http://www.iccsafe.org).
- Provide a copy of a valid WV business license issued by the **WV Department of Tax and Revenue**.
- Provide proof of professional liability insurance (errors and omissions) in the amount of no less than \$1,000,000.00.
- Provide proof of general liability insurance in the amount of no less than \$750,000.00.
- Include payment via Check or Money Order payable to “WVSFMO” for \$100.00. **Do Not Send Cash**

**Renewal:** Certification will come up for renewal every year. Renewal notices are mailed approximately 90 days prior to the expiration date. It is the licensee's responsibility to ensure renewal of the certification. Please contact the division if you have a change of address. Failure to receive a renewal notice does not excuse non-renewal. Renewal fee is \$100.00.

**Continuing Education Requirement:** In order to qualify for renewal each licensee shall complete a minimum of 14 continuing education units every year upon renewal of his or her license.



## Application for West Virginia Electrical Inspector Certification

Be sure to complete all sections of this application in print and legible.

### 1. Applicant Personal Information - Please complete ALL fields.

|                           |  |               |                  |
|---------------------------|--|---------------|------------------|
| Name (Last, First, M Int) |  |               |                  |
| Mailing Address           |  |               |                  |
|                           |  |               |                  |
| Home Phone                |  | Cell Phone    |                  |
| Valid Email Address       |  | Last 4 of SS# | XXX - XX - _____ |
| Employer Name             |  | Work Phone    |                  |
| Master License #          |  | Date of Birth |                  |

### 2. Insurance Information - Submit a copy of your "Certificate of Insurance" with your application.

|   |  |
|---|--|
| <input type="radio"/>   | I carry the required amount of Professional and Liability insurance.             |
| Insurance Agent:  | Phone Number:  |
| <input type="radio"/>   | My employer carries the required amount of Professional and Liability insurance. |
| <b>You must submit letter of employment stating the company carries the required insurance.</b> |  |

### 3. Request for Certification as: please check all boxes which apply

|  |                          |
|--|--------------------------|
| Electrical Inspector Class A – One and Two Family Dwellings Only | <input type="checkbox"/> |
| Electrical Inspector Class B – All Structures                    | <input type="checkbox"/> |
| Electrical Inspector Class C – All Structures and Plans Review   | <input type="checkbox"/> |

### 4. Affidavit Statement

By signing this application, I swear and affirm that the required documentation and information submitted in and with this application is true in every respect. I fully understand that any false or misleading information may result in denial of licensure or revocation of any license obtained by providing false information. I also fully understand that by submitting fraudulent documentation or information, that I may face other penalties under law. I hereby give permission to the Office of The West Virginia State Fire Marshal to contact any employer or school provided on this application to verify the information provided by the applicant is accurate. Being qualified, according to the provisions of Chapter 29, Article 3C, Code of West Virginia, I hereby make application for licensure.

|           |  |      |  |
|-----------|--|------|--|
| Signature |  | Date |  |
|-----------|--|------|--|