



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

### Application for West Virginia Temporary Electrician License

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

# Important Information

- You must be at least 18 years of age.
- Qualification requirements for temporary electrical licensure in West Virginia are as follows without any exceptions or variances:
  - **Temporary Journeyman License -**
    - 1 year (12 months) or 2,000 hours of aboveground hands-on electrical work experience. This requirement cannot be bypassed by having tested into a Union Journeyman Wireman card without completing the apprenticeship program.
    - AND**
    - Proof the applicant completed one of the two following programs:
      - An approved WV Department of Education 1080-hour Electrical Technician Vocational Program.
      - OR**
      - An approved US Department of Labor Formal Apprenticeship Program.
  - **Temporary Master License -**
    - 2 years (24 months) or 4,000 hours of aboveground hands-on electrical work experience.
    - AND**
    - Proof the applicant completed one of the two following programs:
      - An approved WV Department of Education 1080-hour Electrical Technician Vocational Program.
      - OR**
      - An approved US Department of Labor Formal Apprenticeship Program.
- The Temporary Electrician license fee is \$50.00. The fee must be paid via **check or money order** only and made out to WVSFMO.
- We recommend that you submit your application for the West Virginia electrical exam while you obtain your temporary license, to avoid not being able to get scheduled for examination in time before your temporary license expires.
- Temporary Electrician Licenses will be issued **one** time only. They are intended to get the individual to work while awaiting the next examination date to obtain a regular West Virginia Electrician License.
- Temporary Electrician Licenses are valid for 90 days. There are **no** extensions, renewals, or deferments for these licenses. Effective date starts the day that the Fire Marshal's Office processes your application for temporary licensure and will run 90 days from thereon.

# **Instructions**

- Please complete the Temporary License application form legibly and in ink and submit it along with the required proof of completion from approved programs and the license fee to the following address:

WV State Fire Marshal's Office  
Regulatory and Licensing  
1700 MacCorkle Ave SE, 4<sup>th</sup> Floor North  
Charleston, WV 25314

- Your social security number will be used for identification purposes only at our agency and will not be published at any time.
- Incomplete applications or applications submitted without the proper documentation will be returned to the applicant without review.
- If the application is approved, you will be issued a West Virginia Temporary Electrical License card. This license card will be mailed to the address on file within 15 business days of license approval. If the application is denied, the agency will advise in writing the reason(s) for denial.
- If you have any questions, please contact the agency at 304-558-2191 or via our website at [firemarshal.wv.gov](http://firemarshal.wv.gov)



Office Use Only

Approved On:

By:

Typed:

License Number:

## West Virginia Temporary Electrician License Application

### Applicant Information - All Fields Required

|                             |  |                |  |                |  |
|-----------------------------|--|----------------|--|----------------|--|
| Last Name                   |  | First Name     |  | Middle Initial |  |
| Mailing Address             |  |                |  |                |  |
| City, State, Zip            |  | Contact Number |  |                |  |
| Email Address               |  |                |  |                |  |
| Employer                    |  | Work Phone     |  |                |  |
| Full Social Security Number |  | Date of Birth  |  |                |  |

### License Level

(Select the Temporary License Level for which you are applying)

☐ Temporary Journeyman Electrician

☐ Temporary Master Electrician

### Electrical Licensure History

(Answer All Questions)

|  |  |       |  |              |  |
|--|--|-------|--|--------------|--|
| Are you currently licensed as an electrician in another State or Jurisdiction?                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No | State |  | License Type |  |
| <b>If you have more than one Electrician license, please list them on a separate sheet of paper.</b>               |  |       |  |              |  |
| Have you ever been denied an electrical license in any other State or Jurisdiction?                                | <input type="checkbox"/> Yes <input type="checkbox"/> No | State |  |              |  |
| <b>If you answered Yes to the above question, please explain on separate sheet of paper.</b>                       |  |       |  |              |  |
| Have you ever had an electrical license revoked or suspended in any other State?                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No | State |  |              |  |
| <b>If you answered Yes to the above question, please explain on separate sheet of paper.</b>                       |  |       |  |              |  |
| Are you currently under investigation or indictment for faulty electrical work in any other State or Jurisdiction? | <input type="checkbox"/> Yes <input type="checkbox"/> No | State |  |              |  |
| <b>If you answered Yes to the above question, please explain on separate sheet of paper.</b>                       |  |       |  |              |  |

## Electrical Work Experience

(This section for electrical work experience only)

|  |  |                                  |                           |  |     |  |
|--|--|----------------------------------|---------------------------|--|-----|--|
| Employer Name  |  |                                  |                           |  |     |  |
| Employer Address   |  |                                  |                           |  |     |  |
|  | City   |                                  | State                     |  | Zip |  |
| Employer Contact   |  | Employer Contact<br>Phone Number |                           |  |     |  |
| (Employer Contact is the name of the person who can verify your electrical work experience at this employer) |  |                                  |                           |  |     |  |
| Dates of Employment  |  |                                  | Total Months<br>Employed: |  |     |  |
| Detailed Description of<br>Electrical Work Performed   |  |                                  |                           |  |     |  |
| Work Setting –<br>Select All that Apply  | <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential |                                  |                           |  |     |  |
|  |  |                                  |                           |  |     |  |
| Employer Name  |  |                                  |                           |  |     |  |
| Employer Address   |  |                                  |                           |  |     |  |
|  | City   |                                  | State                     |  | Zip |  |
| Employer Contact   |  | Employer Contact<br>Phone Number |                           |  |     |  |
| (Employer Contact is the name of the person who can verify your electrical work experience at this employer) |  |                                  |                           |  |     |  |
| Dates of Employment  |  |                                  | Total Months<br>Employed  |  |     |  |
| Detailed Description of<br>Electrical Work Performed   |  |                                  |                           |  |     |  |
| Work Setting –<br>Select All that Apply  | <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential |                                  |                           |  |     |  |

## Work Experience Continued

(This section for electrical work experience only)

|  |  |                                  |                           |  |     |  |
|--|--|----------------------------------|---------------------------|--|-----|--|
| Employer Name  |  |                                  |                           |  |     |  |
| Employer Address   |  |                                  |                           |  |     |  |
|  | City   |                                  | State                     |  | Zip |  |
| Employer Contact   |  | Employer Contact<br>Phone Number |                           |  |     |  |
| (Employer Contact is the name of the person who can verify your electrical work experience at this employer) |  |                                  |                           |  |     |  |
| Dates of Employment  |  |                                  | Total Months<br>Employed: |  |     |  |
| Detailed Description of<br>Electrical Work Performed   |  |                                  |                           |  |     |  |
| Work Setting –<br>Select All that Apply  | <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential |                                  |                           |  |     |  |
|  |  |                                  |                           |  |     |  |
| Employer Name  |  |                                  |                           |  |     |  |
| Employer Address   |  |                                  |                           |  |     |  |
|  | City   |                                  | State                     |  | Zip |  |
| Employer Contact   |  | Employer Contact<br>Phone Number |                           |  |     |  |
| (Employer Contact is the name of the person who can verify your electrical work experience at this employer) |  |                                  |                           |  |     |  |
| Dates of Employment  |  |                                  | Total Months<br>Employed  |  |     |  |
| Detailed Description of<br>Electrical Work Performed   |  |                                  |                           |  |     |  |
| Work Setting –<br>Select All that Apply  | <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential |                                  |                           |  |     |  |

## Education

(Attach a copy of your program completion certificate to this application)

☐ US Dept. of Labor Formal  
Apprenticeship Program

Completion Date

Apprenticeship Name

Apprenticeship Sponsored by

☐ WV Dept. of Education 1080hr  
Electrical Vocation Program

Completion Date

School Name

Instructor Name

## Affidavit

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 3B, Code of West Virginia, I hereby make application for licensure.

Signature

Date