



ELECTRICIAN LICENSE APPLICATION

Department of Building, Planning, & Development

210 S Cedar St PO Box 506 Auburn IN 46706 | 260.925.6449 | 260.925.8239 fax | bpd@ci.auburn.in.us

APPLICANT INFORMATION

Applicant*	Name	
	Address	
	Phone / Email	

*City of Auburn licenses individual electricians, not electrical contracting companies

LICENSE INFORMATION

Type	<input type="checkbox"/> New	Except an Apprentice license, attach a copy of test results from the electrician's examination for the class of license requested.	
	<input type="checkbox"/> Reciprocal	Allen Co, IN only, consult Allen Co Building Dept for this information	
	<input type="checkbox"/> Renewal	Existing City of Auburn License #	
Class	<input type="checkbox"/> Master \$50	<input type="checkbox"/> Journeyman \$25	<input type="checkbox"/> Apprentice \$15
	<input type="checkbox"/> Master Residential \$50	<input type="checkbox"/> Journeyman Residential \$25	

EMPLOYMENT HISTORY

Current Employer	Name	
	Address	
	Phone/Email	
	Dates of Employment	
	Work Performed	
Previous Employer	Name	
	Address	
	Phone/Email	
	Dates of Employment	
	Work Performed	

APPLICANT SIGNATURE

I certify that the information provided in this application is true and correct to the best of my knowledge.

Signature of Applicant _____ Date _____

OFFICE USE ONLY

License Number		Master	\$
Fee		Master Res	\$
Cash/Check/Card		Journeyman	\$
Receipt #		Journeyman Res	\$
Issued by/Date		Apprentice	\$