



State of Idaho
Division Of Occupational and Professional Licenses
Idaho Electrical Board

BRAD LITTLE
Governor
RUSSELL BARRON
Administrator

11341 W Chinden Blvd.
P.O. Box 83720
Boise, ID 83720-0063
(208) 334-3233
dopl.idaho.gov

Limited Electrical Trainee Registration Application

Hours will only be credited so long as you are actively registered with the Division of Occupational and Professional Licenses.

Statutes and Rules governing Limited Electrical Trainees can be viewed at <https://dopl.idaho.gov>. It is your responsibility to ensure you read and understand the requirements to perform work in Idaho. Please be sure to keep a copy of this application for your records. Registrations are non-transferable.

All fields within this application are required. If any field is left unanswered, the application will not be processed.

Registration Type (select one):

- | | | |
|---|---|--|
| <input type="radio"/> Solar Photovoltaic | <input type="radio"/> Sign | <input type="radio"/> Limited Energy |
| <input type="radio"/> Irrigation Sprinkler | <input type="radio"/> Well Driller/Water Pump Installer | <input type="radio"/> Outside Wireman
(Lineman) |
| <input type="radio"/> Elevator, Dumbwaiter, Escalator, or Moving-Walk | | |
| <input type="radio"/> Manufacturing/Assembling Equipment | | |
| <input type="radio"/> Refrigeration, Heating, and Air-Conditioning | | |

Applicant Legal Name: _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____
(Required by Idaho Code § 73-122)

Mailing Street Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Applicant Email: _____
(Required by Idaho Code § 67-2609)

Are you or your spouse an active member or honorably discharged veteran of the United States Armed Services? Yes No

Have you ever held a limited electrical license in another jurisdiction? Yes No
If yes, a **License Verification Form** completed by the state of licensure must be submitted with this application; A copy of your license cannot be accepted.

The following documentation must be submitted with this application:

- \$30.00 Non-Refundable Processing Fee (Do not send cash)
- Complete and Signed Application
- License Verification Form from another state, if applicable

Certification

I hereby certify, to the best of my knowledge, the information on this application is true and correct. I understand my registration may be suspended, revoked, or otherwise disciplined if it was obtained through false information. I further understand the Division of Occupational and Professional Licenses may release information contained in licensing applications as required by law.

Signature of Applicant

Date

Send your application via

Email: customer-service@dopl.idaho.gov

Postal Mail:

Idaho Division of Occupational and Professional Licenses
C/O Trade Licensing
PO Box 83720
Boise, ID 83720-0063

In-Person:

11341 W Chinden Blvd. Boise, ID 83714
1250 Ironwood Dr. Ste 220 Coeur d'Alene, ID 83814
155 N. Maple St. Blackfoot, ID 83221

