



# Credential Application

Remit to: State of Wisconsin  
 Department of Commerce-Credentialing  
 P.O. Box 78780  
 Milwaukee WI 53293-0780  
 Phone (608) 261-8467  
 TTY: Contact Through Relay  
 7:45 a.m. - 4:30 p.m.  
 E-mail: madisoncred@commerce.state.wi.us

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

**THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:**

- A. Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

**Instructions:** Please review any pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. **Be certain to sign and date the application.** The applicant's social security number is mandatory information. **Make a photocopy of the completed application for your records.**

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. **Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats, but they may not be disclosed to anyone except other Wisconsin governmental agencies.**

<b>Applicant Information</b>	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, E-mail Address:	

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Applicant's Signature
Date (mo/day/yr)

**Send application and payment to:** State of Wisconsin, Department of Commerce-Credentialing, P.O. Box 78780, Milwaukee, WI 53293-0780

**Overnight mail delivery and Office location:** State of Wisconsin, Department of Commerce-Credentialing 201 W. Washington Ave., Madison, WI 53703

**All other correspondence:** Wisconsin Department of Commerce, Safety & Buildings Div., P.O. Box 7082, Madison, WI 53707

## MASTER ELECTRICIAN CERTIFICATION-cost code 7631

**Application and Exam Fee (nonrefundable): \$65.00** class code 7631

Make checks payable to: Department of Commerce. The fee consists of a \$35 application fee and an exam fee of \$30. When the exam is passed, the applicant will be asked to pay a \$200 credential fee which will be prorated because the credential expires on a specific date. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from June 30<sup>th</sup>.

A person holding a master electrician certification may apply without examination for a commercial electrical inspector certification.



In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover information contained in chapters Comm 5 and Comm 16 (Electrical Code-Vol. 2), Wisconsin Administrative Code and the 2008 National Electrical Code. The exam is open book. Copies of current Wisconsin Administrative Codes may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253. Copies of current National Electrical Codes may be purchased from the National Fire Protection Association @ (800) 344-3555.

**When there is a change to Wisconsin Administrative Codes, exams will cover the new code one month after the effective date. Current code development projects can be viewed here: <http://commerce.wi.gov/SB/SB-CodeDevelopment.html>**

<b>Exam Name:</b> Master Electrician	This is a 4-hour exam
Daytime Phone Number:	

### To Schedule a 2010 exam:

- Choose a city and put a check mark behind the date you would like to take the exam.
- Record a telephone number where you can be reached during the day in case that exam is filled.
- Submit the **fee and this application to the division at least 30 days in advance of the exam date chosen**. Keep a copy of this application for your records.
- If special accommodations are needed, contact Safety and Buildings, 608-261-8467, prior to submitting your application.
- You will receive a letter from S&B when division staff processes your exam request.

**Exams will no longer be offered at Saturday locations after December 13, 2009.**

**Select one: AM (Starts at 8 a.m.)  or PM (Starts at 1 p.m.)**

**Pewaukee - Country Springs Hotel & Conference Center, 2810 Golf Road, Pewaukee, WI 53072**

January 26  February 24  March 17  April 21  May 25  June 22  July 21  August 25   
September 8  October 29  November 24

**Green Bay – Comfort Suites & Rock Garden Conference Center, 1951 Bond Street, Green Bay, WI 54303**

February 9  April 14  June 9  August 11  October 5  December 8

**Tomah – Cranberry Country Lodge & Conference Center, 319 Wittig Road, Tomah, WI 54660**

March 10  May 12  July 7  September 22  November 10

**Education Hours Required to Renew:** The renewal of a master electrician certification shall be contingent upon the master electrician obtaining at least 24 hours of acceptable continuing education three months prior to the expiration date of their credential. A person who holds a license as a master electrician may apply to the department for waiver of the continuing education requirements on the grounds of prolonged illness or disability or similar circumstances. Each application for waiver shall be considered individually on its merits by the department.