

THE STATE



OF WYOMING

Department Of Fire Prevention & Electrical Safety

MATTHEW H. MEAD
GOVERNOR

LANNY APPLGATE
STATE FIRE MARSHAL

RECIPROCAL INFORMATION

Anyone who has tested and failed for a Master or Journeyman electrical license, within the state of Wyoming, is not eligible for a reciprocal license until they have held a license from their primary state for a period of three (3) years and must show proof of an approved continuing education seminar of sixteen (16) hours on electrical code which is currently enforced in the State of Wyoming.

The State of Wyoming is Reciprocal with the Journeyman Electrician License in the following states:

ARKANSAS	COLORADO
SOUTH DAKOTA	NEW HAMPSHIRE
OREGON	MINNESOTA
TEXAS	IDAHO
NEBRASKA	MONTANA
UTAH	NEW MEXICO
MAINE	

To receive a reciprocal journeyman license, you must have obtained your license by examination with a score of 70% or more, and have held your license for at least one year. We will need to receive an application form signed and notarized, **along with a copy of your license** and a check or money order made out to the "State of Wyoming" for \$100.00.

The State of Wyoming is Reciprocal with Master Electrician License in the following states:

IDAHO, SOUTH DAKOTA & UTAH

To receive a reciprocal master license, you must have obtained your license by examination, received a score of 75% or better and have held your license for at least one year. We will need to receive an application form signed and notarized, **along with a copy of your license** and a check or money order made out to the "State of Wyoming" for \$200.00.

If you have any questions regarding the reciprocal license, please give our office a call at (307) 777-7288.

**Please send all applications with the appropriate fees to:
Department of Fire Prevention & Electrical Safety
Electrical Licensing
Herschler Bldg., 1 West
Cheyenne, WY 82002**

* State the type or grade of electrical license you have: _____

* License Number: _____ * From what state?: _____

In force from _____ To _____ * Was this license obtained by examination? YES NO

* Have you ever had an electrical license revoked or denied by this or any other state? YES NO

*If "YES", attach a detailed statement explaining who revoked or denied the license and why.

*Have you ever held an apprentice, journeyman, master or any other type of **Wyoming** license? YES NO

*If "Yes" what type of license was it? _____

*If your license is no longer active, when did it expire? _____

*If you previously had a **Wyoming** license, was the licensed received by?

Exam _____ **Reciprocation** _____ **Apprenticeship** _____

Remarks by Applicant

APPLICATIONS WILL NOT BE PROCESSED UNLESS COMPLETELY FILLED OUT, SIGNED, NOTARIZED AND ACCOMPANIED BY THE APPROPRIATE FEES. PLEASE MAKE CHECKS, MONEY ORDERS OR CASHIER'S CHECKS PAYABLE TO THE STATE OF WYOMING AND MAIL THEM WITH THE COMPLETED APPLICATION TO:

Department of Fire Prevention & Electrical Safety
Attn: Electrical Licensing
Herschler Building, 1 West
Cheyenne, WY 82002

~This Application Must Be Signed And Verified~

I, _____, swear upon oath that the following facts are true:

1. I have applied for a Wyoming _____ Reciprocal license. I acknowledge receipt of the Wyoming Electrical Board Rules and Regulations. I have read the materials submitted in my application. I know and understand the contents thereof.
2. The information submitted in my application is true and accurate.
3. I understand that the State Chief Electrical Inspector may verify my qualifications as stated in W.S. 35-9-122.
4. As described in W.S. 35-9-130, untrue or inaccurate statements in my application may constitute grounds for revocation or forfeiture of my license and/or filing of criminal charges against me and those who assisted me in submitting false information.

* _____
Signature Date

This section is to be completed by a Notary Public

State of: _____ County of: _____

The foregoing instrument was acknowledged before me by: _____

This _____ day of _____ 20_____.

Notary Public (seal)

My commission expires: _____

Space Below Reserved Office Use Only

Approved for Reciprocal License: _____ **Date:** _____

Rejected: _____ **Date:** _____ **Reason:** _____

Received By: _____ **Date:** _____

Fee paid: \$ _____ () Cash () Check/Money Order Number: _____

Receipt Number: _____ **License Number:** _____