STATE OF MARYLAND BOARD
OF ELECTRICAL EXAMINERS & SUPERVISORS
FOR CALVERT COUNTY, MARYLAND
County Administration Building
150 Main Street – Office 335
Prince Frederick, MD 20678
Phone: (410) 535-2155 (301) 855-1243

Office Use Only
Calvert County Reg / Lic #_____
Processed _____ Date _____
Paid $ _____ Type _____
Issued _____ Mailed _____
IPS _____ Access _____ Scan _____

APPLICATION FOR REGISTRATION

Master Electrician, Low Voltage, Restricted Master

ALL NEW AND EXPIRED APPLICANTS MUST APPEAR IN PERSON

The following must be submitted with the application, Incomplete application packages will not be processed

1. **Application**, complete, with applicant's **original wet** signature
2. **Government issued photo ID**, color copy
3. **Certificate of Insurance**, Minimum coverages: $300,000 General Liability and $100,000 Property damage, as per State law. Certificate holder must list ***BOARD OF ELECTRICAL EXAMINERS AND SUPERVISORS, CALVERT COUNTY, MD.***
4. **State License**, **Signed** Copy of your Current Maryland State License for Master Registrations
5. **Letter of Good Standing**, Original Letter of Good Standing from issuing Maryland county for Low Voltage and Restricted Master Registrations—Required for new registrations or renewals if the applicant has been registered with Calvert County for less than three (3) years.
6. **Registration / Renewal Fee**, Cash, Check or Money Order only—made payable to Calvert County Treasurer:
   $50.00 - Master, Restricted Master, Low Voltage
   $20.00 - Inactive Master, Inactive Restricted Master, Inactive Low Voltage

*Renewal applications received or postmarked after June 30, 2024 will be charged the Registration Fee plus a $50.00 Restoration Fee. If missing information is received after the June 30th renewal deadline, the Restoration Fee will be applied.

*All fees are non-refundable. Issued registrations are not transferable for any reason.

Type of Registration: ☐ New ☐ Renewal—Current County Registration # _____

☐ Master ☐ Low Voltage ☐ Restricted Master

Status: ☐ Active ☐ Inactive **(Certificate of insurance not required)**

Applicant Name _____

Maryland State Electrical License Number OR MD County of Original License/Registration _____

Applicant Primary Mailing Address _____

City _____ State _____ Zip _____

E-mail Address _____

Phone Number _____ Alternate Phone Number _____

Company Name/Trading as (As appears on COI) _____

**Registration Holders are required to notify the Board, in writing, within 30 days of any change of contact/address information. Renewals submitted after 90 days of the expiration date shall be considered expired and will be subject to Board consideration or examination for reinstatement. **

Applicant Signature _____ Date _____

*By signing this application, you are certifying that the information listed above is true and accurate. I understand that any incomplete, inaccurate, or false information may cause my application to be delayed, denied, or revoked. I acknowledge that any fees included with my submittal will be processed upon receipt. However, my application for registration / renewal will not be completed until such time as all deficiencies have been addressed.

Maryland Relay for Impaired Hearing or Speech 1-800-735-2258 Statewide Toll Free