



Application Instructions for Journeyman Electrician or Plumber **(Certificate of Competency)**

Any inquiries regarding the following instructions should be directed to Contractor Licensing.

Email: licensing@hcflgov.net

Phone: (813) 272-5600

1. WHO MAY FILE FOR JOURNEYMAN ELECTICIAN OR JOURNEYMAN PLUMBER:

There is no State of Florida requirement for anyone to hold a "Journeyman" certificate of competency. This certificate does not permit the holder to perform any work or enter into any contracts on his/her own. The certificate holder must always work under the supervision of a properly licensed Electrical/Plumbing Contractor.

2. APPLICATION AND FEES:

The application fee is \$150 and non-refundable.

3. REQUIREMENTS FOR EXPERIENCE:

12,000 hours (6 years) as an Apprentice under the supervision of a licensed contractor

OR

8,000 hours (4 years) as an Apprentice and 4 year completion of Florida approved apprentice program

4. EXAMINATION:

If you have completed an apprenticeship program recognized by the Florida Department of Education/Department of Labor and Employment Security, you may have already taken the exam. If so, have your exam scores with your application or sent to the county prior to applying.

If you have not taken the exam, Contractor Licensing will provide your contact information to a third-party testing agency. The agency will contact you via email and/or phone. All exam scheduling, payments, locations, and instructions will be handled by the testing agency. They will also provide a list of reference materials for the exam. The minimum score required is 75%. The exam is open-book. Verify with the testing agency their policy regarding open-book rules.

Special Exams for persons qualifying under the American Disabilities Act may be arranged through the testing agency. In order to qualify for special exams, the applicant must meet ADA requirements and furnish required documentation from a doctor to the testing agency.

5. RECIPROCITY:

Once obtained, the Journeyman Certificate of Competency is recognized in all jurisdictions throughout the State of Florida. You do not need to reciprocate your license with any other jurisdiction unless specifically required to do so for employment. If required to obtain a license in another jurisdiction you will need to request and pay for a "Letter of Reciprocity" to be sent to the receiving jurisdiction.

6. REGISTRATION FEES:

The registration fee is \$70 for a 2 year cycle. The cycle begins on August 31st of odd years. Contractor Licensing can provide an exact fee due when you are ready to register for your license.

7. APPLICATION SUBMITTAL:

Hillsborough County will not process an incomplete application. All required information must be attached and on forms provided in the application (see page 2 for Checklist).

The application should be submitted in person; however, if it is not possible to do so, the application may be mailed with payment. Please include a self-addressed, stamped envelope for your receipt to be returned to you. If paying by check, make check payable to Hillsborough County BOCC. For applications sent by mail, this may result in additional delays in processing as incomplete applications will be returned to the applicant. Hillsborough County will not hold an incomplete package.

Mail to: Hillsborough County Contractor Licensing, 601 E. Kennedy Blvd., 19th Floor, Tampa, FL 33602



Checklist for Application Submittal

- Completed application
- Copy of government issued identification (also, if not a U.S. citizen, you will need a copy of your Permanent Residency card)
- One (1) passport-sized color photograph
- Copies of any Certificates of Completion from any accredited school if you completed a 4 year apprenticeship
- Copy of your test score from approved agency if you have already taken the exam

THE FOLLOWING ITEMS ARE REQUIRED FOR RECIPROCITY APPLICATIONS ONLY (in addition to the above documents):

- If applying for Reciprocity, please have the County/Jurisdiction in which you took your exams send a Letter of Reciprocity prior to application submittal to Hillsborough County.
- If applying for Reciprocity, include a copy of any contractor licenses you hold in another County/Jurisdiction.

Application should be delivered to:

Hillsborough County Development Services
ATTN: Contractor Licensing
601 E. Kennedy Boulevard, 19th Floor
P.O Box 1110
Tampa, Florida 33601

For any further questions please contact Contractor Licensing:

Email: licensing@hcflgov.net

Phone: (813) 272-5600

Faxed applications will not be accepted.

Illegible, incomplete, or altered applications will not be accepted.

*****Documents cannot be notarized by family members*****



Application for Journeyman Electrician or Plumber
Certificate of Competency

Applicant Information

Date: _____

I am applying for the following:

_____ Journeyman Electrician

_____ Journeyman Plumber

Check this box if you have already taken and passed your exam

*Attach Recent
COLOR
Passport Photo
(Do not staple)*

Full Name: _____
Last First Middle Suffix

Date of Birth: _____

Are you a citizen of the US? Yes No

NOTE: IF NOT A U.S. CITIZEN, APPLICANT MUST PROVIDE PROOF OF RIGHT TO WORK IN THE U.S.

Mailing Address: _____
Street Number and Street Name

City: _____ County: _____ State: _____ Zip Code: _____

Primary Contact Phone Number: (____) _____ - _____

Email Address: _____



Verification of Construction Experience

Date: _____

Name of Company: _____

Address: _____, _____, _____, _____
Street City State Zip Code

I hereby certify that _____
First Middle Last Suffix

has a total of _____ hours worked as an apprentice in the _____ trade , having performed
Write Electrical OR Plumbing

said work between _____ to _____. (One year of full-time work = 2,000 hours)
MONTH/YEAR MONTH/YEAR

LICENSE HOLDER NAME: _____ LICENSE #: _____

LICENSE HOLDER SIGNATURE: _____ CONTACT PHONE #: _____

State of: _____

County of: _____

Before me, personally appeared, _____, who produced _____
_____ as identification or is personally known to me, and who did affirm and subscribed before me this
_____ day of _____, 20_____.

Affix Seal
or
Stamp

Signature of Notary Public

Name of Notary Typed, printed or stamped

My Commission Expires: _____



Attestation Statement of Applicant

Applicant must provide as part of this Application the supplemental information and documentation required on the "Checklist for Application Submittal" for the Licensing Category being requested.

I certify that I am empowered to execute this application and under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.

Applicant's Signature: _____ Date: _____

State of: _____

County of: _____

Before me, personally appeared, _____, who produced _____ as identification or is personally known to me, and who did affirm and subscribed before me this _____ day of _____, 20_____.

*Affix Seal
or
Stamp*

Signature of Notary Public

Name of Notary Typed, printed or stamped

My Commission Expires: _____



Authorization for Payment by Credit Card

The Center for Development Services, Building & Construction Services

OFFICE USE ONLY	Permit No.	Total \$
	License No.	Fee \$

Complete the following:

Type of payment: VISA MasterCard Discover American Express

Card number _____ Expiration date _____

V Code _____ (Last three digits on the back of the card)

Name (print or type) _____
Name as it appears on the credit card

Card billing address _____
Address used by credit card company to mail billing statements

City _____ State _____ Zip _____

Cardholder signature _____

All information, including zip code, must be completed or your request will not be processed.
A completed form and signature authorizes Hillsborough County staff to charge fees and/or payments for services or permits as applicable to the cardholder's credit card.

For your credit card security, fax your credit card information to the following number.

Fax Number

Contractor Licensing 813-635-7367

If faxing payment form, you **must** inform Licensing when application is emailed.