

Application for Non-Contractor Permit Access

This form is to be used by entities that need to purchase State Electrical Permits but are not required to hold a State Electrical Contractor' License since they are not doing business as an electrical contractor and qualify for the licensing exemptions in Iowa Code 103. Examples of such exemptions are the unlicensed personnel doing electrical work within a commercial or industrial manufacturing facility in which they are employed or the licensed electricians working in a school, hospital, or similar facility. In each case, the individuals must be working within the scope of their employment.

Please read and complete the portion below that is applicable to your facility. Upon approval of your application, information will be emailed to you that will enable you to set up an electrical contractor account and make application for electrical permits as if you were an electrical contractor. All permit fees must be paid using a credit or debit card except for State agencies, which can be internally billed. You may be contacted for additional information for verification purposes.

Commercial or Industrial Manufacturers

This category is for commercial and industrial manufacturing facilities that employ a maintenance staff that are qualified to perform electrical installations within the existing confines of the facility and within the scope of their employment. Please indicate below the type of facility, business name, location and any product or service provided by the facility.

Schools, Hospitals, or Similar Facilities

This category is for facilities that employ State licensed electricians as part of their staff. These electricians perform electrical installations within the existing confines of their facility and within the scope of their employment. Please indicate below the type of facility, business name, location and the name of the electrician(s), including the state issued electrician license number.

As the authorized company/agency representative, I hereby verify the above information to be complete and accurate. I acknowledge that any misrepresentation of this information may result in the suspension of Non-Contractor State Electrical Permit Access.

Name (Please Print) _____ Date _____

Company Title or Position _____ Phone _____

Email Address _____

Signature (electronic signature permitted) _____

Email to Electrical Examining Board at elecinfo@dps.state.ia.us or fax to (515) 725-6151