



The Ohio Construction Industry Licensing Board (OCILB), issues state licenses to Electrical, HVAC, Refrigeration, Plumbing, and Hydronics Contractors who perform commercial work.

**Applicants must:**

- be at least 18 years of age
- be a U.S. citizen or a legal alien (must provide proof)
- have been a trades-person in the type of licensed trade for which the application is filed for not less than five years immediately prior to the date of application.
- never have been convicted of a disqualifying offense as defined in S.B. 337

**PLEASE PROVIDE WITH THE APPLICATION:**

- provide the last five consecutive years tax documents (i.e. W2's or Schedule C Form 1040)

**AND ONE OF THE THREE FOLLOWING OPTIONS:**

- provide one of the four options below to accompany your tax documents
  - Minimum of 1 permit for each of the last 5 years obtained by the licensed contractor (your employer) that you worked under reflected by tax document above.
    - **NOTE: sewer service, water service, gas service and drain cleaning permits DO NOT apply.**
  - Active Journeyman's card in the trade for which the individual is applying
  - Certificate of Completion of apprenticeship from an apprentice program approved by the state of Ohio or the US Department of Labor in the trade for which the individual is applying
  - Proof of 40 hours of continuing education non-duplicated courses completed in **code** taken in the trade applying for from an OCILB approved training agency as a live or virtual course, self guided courses not permitted for licensing purposes.  
(Be advised that sewer service, water service, gas service and drain cleaning DO NOT apply).

**OR**

- currently be a registered professional engineer in Ohio with three years of business experience in the construction industry in the trade for which the individual is applying

**OR**

- five years experience as an Ohio government inspector in the trade for which the individual is applying

**OCCUPATIONAL LICENSING PROCESS FOR VETERANS**

Complete entire application as instructed above. Be sure to complete **Question (11)**; include all hands-on work experience and inclusive dates. You **MUST** Attach your **DD214 (training records)**. You may also attach any documents that support your experience and training in the trade you are applying for such as: training certificates, job evaluation reports, joint transcript, and /or a letter from your Commanding Officer.

Your application will be reviewed by the Board to determine eligibility to sit for the examination. You will be notified by mail of the results of the Board review results. **ONCE YOU HAVE BEEN APPROVED (valid for one year) BY THE BOARD, YOU ARE REQUIRED TO OBTAIN A BCI and FBI BACKGROUND CHECK PRIOR TO SITTING FOR THE EXAMINATION.** Approved candidates will be provided with a PSI Candidate Information Bulletin. The Bulletin will contain detailed instructions on how to schedule your exam(s). All licensure exams are computer based testing by appointment at sites throughout Ohio & the U.S. Individuals who take the examination will receive a notice advising them of their examination pass/fail status at the completion of the exam. Those who pass both sections of the exam can receive a state license by sending a copy of the examination results, a \$25 check made payable to "Treasurer, State of Ohio", and proof of at least \$500,000 contractor liability insurance "Certificate of Liability Insurance". Your liability insurance **AND** license must be assigned to a "contracting company" as defined in Ohio Revised Code 4740.01 Section C.





OHIO CONSTRUCTION INDUSTRY LICENSING BOARD—EXAMINATION APPLICATION

MUST TYPE OR PRINT CLEARLY

1. Type of examination applied for: CHECK ONLY ONE
Hydronics Electrical HVAC
Plumbing Refrigeration

Application Fee: \$25.00

Make check payable to:

TREASURER-STATE OF OHIO

Mail to:

Division of Industrial Compliance
Ohio Construction Industry Licensing Board
6606 Tussing Road, P.O. Box 4009
Reynoldsburg, Ohio 43068-9009

Check #

Date

CC#

EXP / CVV

2. Full Name First Last M.I.

3. Street Address

City State

ZIP County

4. Are you a U.S. citizen? Y N Date of Birth / /

OR

5. Are you a legal alien? Y N (if yes, provide documentation)

6. Home Phone ( ) - Work Phone ( ) -

7. E-Mail Address

8. Have you ever been convicted of a felony? Yes No
If yes: Date of Conviction: / /

Ohio County of conviction:

Offense:

9. NOTE: If approved and issued; you MUST assign your license to a Contracting Company, indicate the Contracting Company name & your position.

Contracting Company Name

Your Current Position/Title: Owner Employee Partner

If you are the owner, are you paying your employees by W-2? Yes No

Be very specific in nature of duties

Attach required tax documentation (i.e. W2 or Schedule C form 1040) one for the last five consecutive years &

Provide proof of 5 years experience, within the specific trade, with one or a combination of the following items

- o minimum of 1 permit for each of the last 5 years obtained by the licensed contractor (your employer) that you worked under reflected by tax document above. (Permits are public record and can be obtained from the Building Department).
NOTE: sewer service, water service, gas service and drain cleaning permits DO NOT apply.
o Current Journeyman's Card
o Certificate of completion of apprenticeship from an apprentice program approved by the state of Ohio or the US Department of Labor
o Proof of 40 completed continuing education hours in code taken in the trade applying for from an OCILB approved training agency in a live or virtual format only, self guided/paced not permitted for licensing.

If applying with a Professional Engineers License: Provide certification of professional engineer in Ohio with three years of business experience in the construction industry in the trade for which you are applying with tax records

FOR OFFICE USE ONLY

Application is:

Approved Board Member Initials

Denied Board Member Initials

Additional information needed:

10. List below your employment history, beginning with the most recent. Attach additional sheets if necessary.

EMPLOYER'S NAME AND ADDRESS	Contractor License # you worked under.	PHONE NUMBER	DATES OF EMPLOYMENT	PLEASE CIRCLE ONE	TITLE OF POSITION
			/ / to / /	FULL OR PART-TIME	

Nature of Duties: \_\_\_\_\_

EMPLOYER'S NAME AND ADDRESS	Contractor License # you worked under.	PHONE NUMBER	DATES OF EMPLOYMENT	PLEASE CIRCLE ONE	TITLE OF POSITION
			/ / to / /	FULL OR PART-TIME	

Nature of Duties: \_\_\_\_\_

EMPLOYER'S NAME AND ADDRESS	Contractor License # you worked under.	PHONE NUMBER	DATES OF EMPLOYMENT	PLEASE CIRCLE ONE	TITLE OF POSITION
			/ / to / /	FULL OR PART-TIME	

Nature of Duties: \_\_\_\_\_

EMPLOYER'S NAME AND ADDRESS	Contractor License # you worked under.	PHONE NUMBER	DATES OF EMPLOYMENT	PLEASE CIRCLE ONE	TITLE OF POSITION
			/ / to / /	FULL OR PART-TIME	

Nature of Duties: \_\_\_\_\_

11. OCCUPATIONAL LICENSING PROCESS FOR VETERANS (only).

BRANCH OF MILITARY	UNIT	INSTALLATION	DATES OF SERVICE	SPECIALTY: (be sure to attach a copy of your DD214 training records).
			/ / to / /	

This applicant agrees to conform to Rules 4101:16-1 through 4101:16-3 of the Ohio Administrative Code relating to the type of license indicated on the front page of this application.

I solemnly swear or affirm that the information I have supplied to each and all of the questions within this application are complete and true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant