



## RECIPROCITY VERIFICATION OF LICENSURE

Please complete Section I of the form and submit to each licensing board that administered the examination. The certification must include a state seal and confirmation the license holder passed the state examination. Scores must be provided by the state you are reciprocating from.

### SECTION I

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State License Number: \_\_\_\_\_ License Type: \_\_\_\_\_

**DO NOT DETACH – THIS SECTION IS TO BE COMPLETED BY AN OFFICIAL OF THE STATE BOARD AND RETURNED DIRECTLY TO THE OHIO CONSTRUCTION INDUSTRY LICENSING BOARD AT 6606 TUSSING ROAD P.O. BOX 4009, REYNOLDSBURG, OH 43068.**

### SECTION II

State of **Kentucky** HVAC License Number: HM \_\_\_\_\_ HJ \_\_\_\_\_

State of **Kentucky** Electrical License Number: CE \_\_\_\_\_ ME \_\_\_\_\_

License Status (Active, Inactive, Escrow): \_\_\_\_\_ Examination Score: \_\_\_\_\_

Is there a history of license suspension, disciplinary action, or revocation? If yes, please explain and attach document. \_\_\_\_\_

Name of state official completing form: \_\_\_\_\_

Date: \_\_\_\_\_ Contact Information: \_\_\_\_\_

State Seal:





## KENTUCKY RECIPROCITY APPLICATION

In order to reciprocate with Ohio for an Electrical License, the applicant **must** currently hold a Kentucky Master Electrician and Contractor License. All applicants must have previously tested with Kentucky to obtain their license(s). Applicants who obtained the Kentucky License via Grandfathering cannot reciprocate. Each trade requires a separate application and fee.

Type of License Applying For: **EL** **HVAC** **RE**

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

KY Electric License Number: CE: \_\_\_\_\_ ME: \_\_\_\_\_ KY HVAC License Number: HM: \_\_\_\_\_ HJ: \_\_\_\_\_

Are you a Citizen of the United States? A lawful permanent resident? (Alien Registration Number/USCIS Number) \_\_\_\_\_

An alien authorized to work until (expiration date, if applicable mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you been convicted of a felony? Yes No

### Required Documents:

**Certificate of Liability Insurance Form**, including without limit, complete operations coverage in the amount of at least \$500,000, certificate Holder must reflect: Ohio Construction Licensing Board, 6606 Tussing Road, Reynoldsburg, OH, 43068.

### Verification of Current Reciprocating State License

*In accordance with Section 4740.01 of the Ohio Revised Code (ORC), an individual is required to assign their license to a Contracting Company.*

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Job Title: **Owner** **Partner** **Employee**

**Application Fee(s):** \$25.00 non-refundable fee per trade.

**Payable To:** Treasure State of Ohio

#### Mail To:

Ohio Construction Licensing Board  
6606 Tussing Road, P.O. Box 4009 Reynoldsburg, OH 43068-9099

**Check #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

CC \_\_\_\_\_

EXP Date \_\_\_\_/\_\_\_\_/\_\_\_\_

CVV \_\_\_\_\_

#### Email To:

OCILB@COM.OHIO.GOV

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_