



MASTER ELECTRICIAN and LOW VOLTAGE/LMTD DATA COMM TECHNICIAN 2024 SHELIVING INSTRUCTIONS

Attached is the shelving affidavit.
This affidavit applies to anyone wishing to shelve his/her license in 2024.

The signed affidavit must be returned to this office by December 31, 2023.

The fee for shelving your license is \$50.00 per year.

If received between January 1st – March 31st, 2024, there will be a late fee of \$25.

Check or Money Order should be made out to the COMMISSIONER OF FINANCE.
Cash is not accepted. Credit card payments accepted in office only.

NOTE:

Westchester Electricians who reciprocate with Putnam County do **NOT** need to shelve.

IMPORTANT!

If you have already shelved for five (5) consecutive years, you must also include a letter addressed to the Electrical Board stating the reason for your continued shelving status.

According to Putnam County Electrical Law, 145-19 (G): Licensees can shelve in consecutive years for a maximum of five (5) years without Board approval. If the licensee wishes to extend shelving beyond five (5) years, the licensee must submit a letter to the Board providing a satisfactory reason for continued shelving.

If you choose to shelve your license, you are not eligible to work in Putnam County. If you are found working without a license, you may be subject to a fine.

Beginning in 2019, any Master Electrician who shelves will be required to take a Continuing Education Class (CEU) for each year of shelving. Certificates issued by the CEU provider will provide proof of completion of the required class. Copies of these certificates must be included in any renewal or reactivation of license.

If you have any questions, please do not hesitate to call the office Monday through Friday from 8:00 a.m. to 4:00 p.m.



COUNTY OF PUTNAM
 Office of Consumer Affairs/Electrical Board
 110 Old Route 6 Bldg. 3
 Carmel, NY 10512
 (845) 808-1617
<http://www.putnamcountyny.gov/consumer-affairs/>

FOR OFFICE USE ONLY	
Old Lic. No. _____	Munis Acct. No. _____
Agent/Op. No. _____	
Munis Lic. No. _____	Bill No. _____
Fee Amount: _____	Batch No. _____
<input type="checkbox"/> Co. Check # _____	<input type="checkbox"/> Pers. Check #: _____
M.O. number _____	
Credit/debit card author: _____	
CEU: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Processed: _____	Shelving Year: 2024

**MASTER ELECTRICIAN and LOW VOLTAGE/LMTD DATA COMMUNICATION TECHNICIAN
 2024 SHELIVING AFFIDAVIT**

This Affidavit must be signed by a licensed Master Electrician or Low Voltage/Lmtd Data Comm Technician seeking to voluntarily inactivate his or her license under Putnam County Electricians Law.

I, the undersigned, fully acknowledge and understand by my signature affixed below, that in addition to my written request and explanation to inactivate or shelve my license in accordance with Putnam County Electrical Law, I am prohibited from doing any work in Putnam County that was authorized by my prior active electrical license. I am fully aware that if I am found doing such work during the period of time that my license is voluntarily shelved, I will be violating the law and shall be subject to the fines and penalties of an unlicensed person, because I will not have a valid license to do such work.

New in 2019: For Master Electricians, I fully acknowledge that I am obligated to complete all required hours of continuing education during the time that my license is shelved. I also acknowledge that if I do not complete the required continuing education hours during the time my license is shelved, I will not be able to reactivate my license.

During the period of voluntary shelving of my license, I will be eligible to work under another Master License holder provided I obtain a Journeyman or Helper license to do so. Without such, I will be violating the law and shall be subject to the fines and penalties of an unlicensed person.

Have you shelved for 5 years? YES NO

If yes, please provide letter for request for continued shelving subject to Electrical Board approval.

Name: _____ License #: _____

Address: _____ City/State/Zip: _____

Home phone: _____ Cell phone: _____

Email: _____

Company name and address: _____

Company phone: _____ Company email: _____

AFFIDAVIT

In consideration of being granted SHELIVING of a Putnam County Master Electrician's or Low Voltage Lmtd. Data Comm. Technician's license, it is agreed that the applicant will comply with the rules and regulations of the Putnam County Electrical law.

I certify that the information on this application is true and accurate and understand that any incomplete, inaccurate or false information may cause the registration to be delayed, denied, suspended or revoked.

PENALTY FOR FALSIFICATION – Falsification of any statement made herein is an offense punishable by a fine and/or imprisonment.

SIGNATURE OF APPLICANT: _____ DATE: _____