

**Electrical Inspection Agency Credential
Application Guide for LicenseE**

**2/9/2024
Rev. 1/2/2025**

Ensure you have registered as an organization. An individual account will not have the option to apply for an Electrical Inspection Agency credential.

Once registered, begin at the Home screen.

Welcome to Wisconsin's Department of Safety and Professional Services



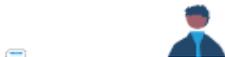
Apply for a License?

If you are new to the site and need to apply for a new license, click the Apply for a License button below.



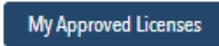
Check your License Status?

If you have submitted an application and want to check its status, click the Check Application Status button below.



My Approved Licenses

Find all of your Approved Licenses, view and download Certificates, and apply for Specialties



Welcome to Wisconsin's Department of Safety and Professional Services

What license can we help you apply for today?

* Category

Trades

* License Types

Electrical Inspection Agency

Don't see the license you're looking for? [Click here](#) to see a full list.

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Welcome to Wisconsin's Department of Safety and Professional Services

New Licensure

An application to apply for a new license.

Select

Reinstatement After 4 Years

Re-instate your expired license beyond the Renewal window.

Select

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Read provided instructions. Use the hyperlink to learn more information about this credential.

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Instructions

The following screens will ask for information required in order to determine your eligibility for the license you selected. You do not need to complete the entire application in one sitting - your progress will automatically be saved.

However, review of your application will be contingent upon submission of all relevant information, documentation, and payment.

For more information related to Electrical Inspection Agency, please visit the profession page on our website - <https://dsps.wi.gov/Pages/Professions/InspectionAgency/Default.aspx>

Next

You cannot edit gray fields. Complete the empty fields. Review all fields to ensure correct information is provided.

Most businesses/organizations applying for this credential have not had a Trades credential in WI. You can verify this by reviewing the list of available Trades credentials at: <https://dsps.wi.gov/Pages/Professions/Default.aspx>

If your business/organization ever held a Trades credential in WI, choose YES at the bottom of the application screen. Also, choose YES at this question if you are completing this new credential application because you are unable to renew your expired Electrical Inspection Agency credential through LicenseE.

Always complete all fields with a red asterisks (*).

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Business Information

The Department must deny your application if you are liable for delinquent state taxes, UI contributions, or child support (Wis. State. 440.14).

Your name, address, phone number, and e-mail address are available to the public. Check this box to withhold street address/PO Box, phone number, and e-mail address from lists of 10 or more credential holders (Wis. Stat. § 440.14).

* Business Name

City of Testville

Business Telephone Number

Business FEIN#

12-3456789

Business Email Address

Organization Address

* Street Number and Name

123 Main Street

Suite or P.O. Box

* City

Green Bay

* State

Wisconsin

* Zip Code

54304

* Country

United States

* Has this business ever held a Trades credential in WI?

Yes No

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Read the instructions for the Business Representative Information and complete this page as appropriate. Note the Business Representative listed here will be the individual notified when the credential is issued and when it is due for renewal.

While government agents are exempted from providing their SSN on applications such as this, a SSN is required to continue with the application at this time. Our team is working to improve the application to remove this requirement where appropriate.

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Business Representative Information

The person applying for an Inspection Agency Registration shall be one of the following: (a) If a municipality, the department head of the agency administering the electrical program. (b) If not a municipality, the owner of the business, a partner in the business applying on behalf of a partnership, or the chairman of the board or chief executive officer applying on behalf of a corporation.

Please select which applies for the Business Representative

*Which of the following is the person applying for an Inspection Agency Registration?

If a municipality, the department head of the agency administering the electrical program.

If not a municipality, the owner of the business, a partner in the business applying on behalf of a partnership, or the chairman of the board or chief executive officer applying on behalf of a corporation. Please select which applies for the Business Representative

* Business Representative's Title

Chairman of the Board

* First Name * MI

* Last Name * Date of Birth

Address

* Street * City

* State * Zip Code

* SSN * Email Address

* Telephone Number

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Answer as appropriate.

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Declarations

*1. Have you ever been convicted of a misdemeanor, felony, or other violation of federal or state law or do you have any felony, misdemeanor, or other violation of federal or state law charges pending against you in this state or any other? This includes convictions resulting from a plea of no contest, a guilty plea, or verdict.

Yes No

*2. Are you incarcerated, on probation, or on parole for any conviction?

Yes No

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Upload appropriate form here if answering Yes on the Declarations page of the application. Otherwise, no supporting documents are required.

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Supporting Documents

Your **Application Number** must be provided to all third parties who are asked to submit documentation in support of your application for licensure. Please log in to the system and click the Check Application Status button located on the home screen to view your application number. Documentation submitted by a third party **must** be submitted using the LicenseE third-party portal at license.wi.gov.

QUESTION	DOCUMENTS	WHO SUBMITS?	ACTIONS
	Convictions and Pending Charges Form #2252	Applicant	
	Other	Applicant	

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Read the Attestation page in its entirety as you will be agreeing to it with your electronic signature.

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Attestations

Certification of Legal Status

*I declare under penalty of law that I am (check one):

- A citizen or national of the United States
- A qualified alien or nonimmigrant lawfully present in the United States who is eligible to receive this professional license or credential as defined in the Business Responsibility and Work Opportunities Reconciliation Act of 1996, as codified in 8 U.S.C. §1601 et. seq. (PRWORA).

For questions concerning PRWORA status, please contact the U.S. Citizenship and Immigration Services in the Department of Homeland Security at 1-800-375-5283 or online at <http://www.uscis.gov>.

Should my legal status change during the application process or after a credential is granted, I understand that I must report this change to the Wisconsin Department of Safety and Professional Services immediately.

Continuing Duty of Disclosure

I understand that I have a continuing duty of disclosure during the application process. If information I have provided in this application becomes invalid, incorrect, or outdated, I understand that I am obliged to provide any necessary information to ensure the information on my application remains current, valid, and truthful. I understand that credentialing authorities may view acts of omission as dishonesty and that my duty of disclosure during the application process exists until licensure is granted or denied.

Affidavit of Applicant

I declare that I am the person referred to on this application and that all answers set forth are each and all strictly true in every respect. I understand that failure to provide requested information, making any materially false statement and/or giving any materially false information in connection with my application for a credential or for renewal or reinstatement of a credential may result in credential application processing delays; denial, revocation, suspension or limitation of my credential; or any combination thereof; or such other penalties as may be provided by law. I further understand that if I am issued a credential, or renewal, or reinstatement thereof, failure to comply with the statutes and/or administrative code provisions of the licensing authority will be cause of disciplinary action.

Signature

By signing below, I am signifying that I have read the above statements (Certification of Legal Status, Continuing Duty of Disclosure, and Affidavit of Applicant) and understand the obligation I have as an applicant or credential-holder should information I have provided to the Department of Safety and Professional Services change.

* Signature

Etta Strey

Date

02-09-2024

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Payment

Please be aware that payments using a checking/savings account may take 3-5 business days to process.

Category	Response	Cost
Initial Fee		\$55.00
Total		\$55.00

The total amount to be paid for this license application is **\$55.00**

Please click the "Pay and Submit" button to proceed with the chosen payment method.

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Pay and Submit

You will be directed to the payment portal. Your application will not be submitted to the Department until your payment is completed.



State of Wisconsin

e-Payment Services

Make a Payment

My Payment

DSPSLicensE

Amount Due \$55.00
Licensee Name null
License Type Electrical Inspection Agency

Payment Information

Frequency One Time
Payment Amount \$55.00
Payment Date Pay Now

Contact Information

You can pay by credit card or check, but both methods must be made through the portal.

Payment Method

Payment Method

- Select
- Checking or Savings**
- Credit/Debit Card

1215
Anytown, MO 12345
DATE _____
PAY TO THE ORDER OF _____ \$ _____
DOLLARS

Press Continue to submit payment. You will receive a submission confirmation and receipt in your email.

A convenience fee will be charged for this transaction. This fee amount will display on the next page where you will be able to cancel or confirm your payment.

Continue

[Cancel](#)