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www.putnamcountyny.com/consumer-arrairs/
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Athena Arvan
Confidential Secretary
Extension 46025

Board of Electrical Examiners

August 5, 2021

RE: Helper Registrations expire September 30, 2021

Attached find an application for the renewal of your Putnam County Helper Registration for the period of October 1, 2021 – September 30, 2023.

Please note that this is a two (2)-year registration and the fee is \$40.

THIS PACKET IS BEING EMAILED TO ALL CURRENTLY REGISTERED PUTNAM COUNTY ELECTRICAL HELPERS, AS WELL AS PUTNAM COUNTY MASTER ELECTRICIANS. NO HARD COPIES WILL BE MAILED.

NEW HELPER REGISTRATION PACKETS CAN ALSO BE FOUND AT THIS SITE:

**<https://www.putnamcountyny.com/consumer-affairs/downloads/>
Select: 2021-2023 ELECTRICAL HELPER RENEWAL PACKET.**

This renewal packet includes:

- Renewal Application Form – To be filled out by Helper
- Child Support Obligations Form – To be filled out by Helper

The following must also be included:

- A copy of Helper's valid photo driver's license from the state in which he/she resides or proof of current home street address, if different from address on driver's license.

- Check or Money Order (no cash accepted) in the amount of \$40.00 made payable to:

Putnam County Commissioner of Finance

Credit card payments accepted in office only.

PLEASE SUBMIT YOUR RENEWAL APPLICATION PROMPTLY.

If you have any questions, please contact the Office of Consumer Affairs/Electrical Board by email at athena.arvan@putnamcountyny.gov . Please put Helper Renewal Question in the subject line of the email.



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

FOR OFFICE USE ONLY	
Orig. Helper Reg. Number:	_____
Munis Acct. No:	_____
Agent/Op No:	_____
Fee Paid: _____	Bill No: _____ Batch No: _____
Co. Check #: _____	Pers. Check #: _____
<input type="checkbox"/> M.O./ <input type="checkbox"/> credit card: _____	
Child Support: <input type="checkbox"/> Y <input type="checkbox"/> N	
Driver's Lic./Proof of residence: <input type="checkbox"/> Y <input type="checkbox"/> N	
Cof D on file: <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	
Date Processed: _____	

Board of Electrical Examiners
HELPER REGISTRATION RENEWAL APPLICATION FOR October 1, 2021 – September 30, 2023

Current Helper Registration Number: _____

Name: _____
 Home Address: _____
 Home Phone: _____ Cell Phone: _____
 Email: _____

Company name: _____
 Company address: _____
 Company phone number: _____
 Company email: _____

Where should we mail correspondence that relates to your Helper registration? Circle one: Home Company

Have there been any unsatisfied judgments against you *since your last application*?

Check one: ___ YES ___ NO

If yes, include a certified copy of your Certificate of Disposition.

- . **THE FEE FOR THE REGISTRATION IS \$40.00.** (No cash accepted)
Check/MO should be made payable to: COMMISSIONER OF FINANCE
Credit card payments accepted in office only.
- . **Mail completed application, Child Support Certification, and a copy of driver's license from the state in which you reside or proof of current home street address, if different from address on driver's license, along with payment (check or money order) to:**
Putnam County Electrical Board
110 Old Route 6, Building #3
Carmel, NY 10512

For questions email: athena.arvan@putnamcountyny.gov; please put Helper Renewal Question in the subject line.

In consideration of being granted a Helper Registration, it is agreed that the applicant will comply with the rules and regulations of the Putnam County Electrical Board of Examiners.
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: _____



New York State Department of Labor

Appendix to a License Application
The child support obligations (New York State General Obligations Law Title 5 section 3-503) do not apply to corporations

Complete, sign and date this form if you are applying for a registration or registration renewal.

Applicant
a. Name: b. Social Security Number:
c. Title d. The type of license requested:
e. Business Name (if applicable):

Certification

Are you under an obligation to pay child support? Yes No
If yes, complete items 1-4.

- 1. I am making payments in accordance with a plan agreed upon by the parties. Yes No
2. I am four months or more behind in the payment of child support. Yes No
3. My child support obligation is the subject of a pending court proceeding. Yes No
4. I am receiving public assistance or supplemental security income. Yes No

If you are four months or more behind in child support or have failed to comply with a summons, subpoena or warrant relating to a paternity or child support proceeding, you may be subject to suspension of your business, professional and/or driver's licenses.

Affirmation

I acknowledge that giving false information is a crime and may result in this license/certificate being revoked.

Signature: Date: