



Elevator Mechanic License Application

Occupational Licensing

www.labor.ok.gov

Melissa McLawhorn Houston, Labor Commissioner

OKLAHOMA DEPARTMENT OF LABOR

3017 N. Stiles, Suite 100

Oklahoma City, OK 73105

405-521-6100/888-269-5353

M-F 8:00am-4:30pm

APPLICATION TYPE	APPLICATION FEE	EXACT AMOUNT IS RECOMMENDED
<input type="checkbox"/> New	\$50.00	
<input type="checkbox"/> Renewal	\$50.00	
<input type="checkbox"/> Late Renewal	\$60.00 *if license expired, but LESS than 30 days	
<input type="checkbox"/> Reinstatement	\$150.00 *If license expired MORE than 30 days	
<input type="checkbox"/> Replacement	\$10.00	

All new applicants must demonstrate proper qualifications by submitting documentation of one of the following:

- Three (3) years of experience in the elevator industry, in construction, maintenance and service/repair, as verified by current and previous employers licensed in this state or another state with a substantially equal program **AND** a written exam **OR**
- Certificate of completion demonstrating successful passage of a mechanic's examination of a nationally recognized training program for the elevator industry such as the NEIEP or its equivalent **OR**
- Certificate of completion of an apprenticeship program for elevator mechanics registered with the Bureau of Apprenticeship and Training of the U.S. Department of Labor or a state apprenticeship council **OR**
- A valid elevator mechanic's license from a state having standards substantially equal to ours, without examination

REQUIRED DOCUMENTATION FOR NEW APPLICANTS

U.S. CITIZENS:

- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired passport **OR** a W-2 form from current employer

NON-U.S. CITIZENS:

- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired Passport **OR** A W-2 form/1099 form
- Verification of Immigration Status

All new applicants must appear IN PERSON at the Oklahoma Department of Labor or ODOL approved facility

REQUIRED DOCUMENTATION FOR RENEWAL APPLICANTS

Renewal applications can be mailed in to the Oklahoma Department of Labor with the following items:

U.S. CITIZENS:

- 8 hours continuing education as outlined in **OAC 380:70-5-7**
- Copy of Unexpired Driver's License **OR** State issued photo-identification Card **OR** Military ID **AND**
- Copy of Expiring Occupational License

NON-U.S. CITIZENS:

- 8 hours of continuing education as outlined in **OAC 380:70-5-7**
- A valid, unexpired Driver's License **OR** State Issued Photo Identification Card **OR** Military ID **AND**
- Copy of Expiring Occupational License
- Verification of Immigration Status

All renewal applicants must appear IN PERSON at the Oklahoma Department of Labor every ten years

ODOL License #, if not new: _____

Name:		Employed By:	
Mailing Address:	City:	State:	Zip Code:
Social Security #:		Date of Birth:	
Cell Phone #: ()	E-mail Address:		

MILITARY STATUS:

Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma? Yes No

If yes, provide date of discharge/transfer: _____

Are you a spouse of an active duty member of the Armed Forces of the United States? Yes No

I certify all statements are true to the best of my knowledge and that all work shall be done in compliance with the State of Oklahoma elevator law, rules, and regulations adopted by the Oklahoma Department of Labor; I also certify I am actively employed by the company I'm representing and that in the event of my leaving said firm, agree to immediately notify the Oklahoma Department of Labor.

Applicant Signature / APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE _____ **DATE** _____

FOR OFFICE USE ONLY

The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.	Date:	Lic #:	Receipt #:
	Initials:	Check/Cash:	Amount: