

AMENDMENT REQUEST APPLICATION

INSTRUCTIONS

(Only ONE Classification per Amendment Request)

The following criteria must be met for review to amend your license classification.

1. The applicant must be currently licensed and in good standing (no open violations on record) with the Board.
2. List a minimum of three (3) commercial projects successfully completed by the applicant in prior years (with their own forces) specifically in the classification requested. If you wish to add multiple classifications to your license, please submit an Amendment Request Form for **EACH** classification requested.
3. Submit three (3) reference letters from any combination of the following:

Licensed General Contractor
Registered Architect
Registered Professional Engineer
Qualified Person as Determined by the Board

The work/job reference letters must verify work experience for each job listed. The letters shall include:

Date and location of project
Type of work performed
Name of project
Amount of contract

Letters should be on the referring company's letterhead and must be dated and signed.

*****This is not a character reference*****

4. The applicant must have a sufficient bid limit and equipment holdings to successfully complete contracts under the requested classification.
5. EXAMINATION:
 - a) **Applicant must successfully pass all examination(s) for classification(s) requested.**
 - b) **Additional work/job reference letters will be required where there is no technical written examination. Letters submitted with the initial amendment request cannot be used.**
 - c) **Certification Cards from other Alabama licensing agencies may be required.**

A specialty classification under the requested major classification may be approved when an applicant is unable to meet all review criteria. This provides the applicant the ability to successfully complete and document projects for further consideration and Board review.

****AMENDMENT REQUESTS MUST BE SUBMITTED NO LESS THAN 10 DAYS PRIOR TO A BOARD MEETING****

<http://genconbd.alabama.gov/Deadlines.aspx>

Submit the Amendment Request Application along with the Qualifying Party Form to the following address:

Alabama Licensing Board for General Contractors, 2525 Fairlane Drive, Montgomery, AL 36116

ALABAMA LICENSING BOARD FOR GENERAL CONTRACTORS

CLASSIFICATION AMENDMENT REQUEST

Telephone: 334-272-5030 www.genconbd.alabama.gov Fax: 334-395-5336

- NOTES: 1.** **Three** letters of reference, from a Registered Architect, Registered Professional Engineer, Other Licensed General Contractor, or Qualified Person as Determined by the Board, verifying work experience for each job listed below, must be attached for the “type” of classification requested.
- 2.**
- a) Applicant must successfully pass all examination(s) for classification(s) requested.
 - b) Additional letters of reference will be required where there is no technical written examination. Letters submitted with the initial amendment request cannot be used.
 - c) Certification Cards from other Alabama licensing agencies may be required.

Name:	Alabama License No.:
Address:	Bid Limit:
Current License Classification:	
Requested Classification:	

List below a minimum of **THREE** projects your organization has completed in the classification you are requesting. Please indicate (*) projects where experience was gained under a company other than entity listed above.

Classification of Work Performed	Location (City, State)	Year	Owner	Contract Amount	(*) For What Company

The Undersigned hereby represents that the foregoing statements are true to the best of their knowledge, information, and belief.

Date	Print Name	Signature	Title

ALABAMA LICENSING BOARD FOR GENERAL CONTRACTORS

QUALIFYING PARTY FORM



www.genconbd.alabama.gov

JOSEPH C. ROGERS, JR.
EXECUTIVE SECRETARY

2525 FAIRLANE DRIVE
MONTGOMERY, AL 36116

TELEPHONE NO. 334-272-5030
FAX NO. 334-395-5336

Amendment Request applicants may be required to take the *Trade Examination(s)*.

Examinations are administered by PSI (Psychological Services Inc). This completed form must accompany your Amendment Request.

Should you have any questions, please feel free to contact our office at (334)272-5030.

Companies may have multiple qualifiers. If your company has multiple qualifiers, please submit a qualifying party form for **EACH** qualifier.

Company Name: _____

Company Address: _____

Company Phone No: _____

City: _____

State: _____

Zip: _____

Qualifiers Last Name: _____

First Name: _____

Middle Initial: _____

Social Security #: _____

Email: _____

(if qualifier does not have email address – use company email address)