

ALABAMA LICENSING BOARD FOR GENERAL CONTRACTORS

JOSEPH C. ROGERS, JR.
EXECUTIVE SECRETARY

2525 FAIRLANE DRIVE
MONTGOMERY, ALABAMA 36116

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

Application Forms may be downloaded at www.genconbd.alabama.gov

APPLICATION INSTRUCTIONS AND INFORMATION

Please review the following requirements concerning application preparation and submission:

A cashier's check, certified check or money order in the amount of \$300 (non-refundable, non-transferable) made payable to the Alabama Licensing Board for General Contractors **must** accompany this application.

****Personal or company checks will be returned.****

1. Application and fee must be received at least **thirty (30) days prior to regular board meeting dates**. Board dates are available on our website: www.genconbd.alabama.gov. Changes in meeting dates and/or special called meetings will also be posted on the Board's website.
 2. Please type or print plainly in ink. All questions must be answered and financials completed. Additional information, including supplementary or explanatory notes considered necessary, may be furnished by inserting where needed.
 3. Complete name, address, phone number and contact person for each reference must be listed. Fax numbers for references will be used when provided. Reference contacts will **ONLY** be notified in writing **twice**. If your reference does not respond in a timely manner, you will be required to supply additional reference information. When selecting references to include on their application, applicants should consider **only** those references that are able to verify the work experience and classification type(s) that is listed on page 12 of their *Confidential Financial Statements, Equipment Questionnaire and Experience Statement*.
- ALL REFERENCES MUST BE RECEIVED NO LATER THAN TWO WEEKS BEFORE THE BOARD MEETING IN ORDER FOR YOUR APPLICATION TO BE CONSIDERED BY THE BOARD.**
4. Be sure that page 7 is signed and notarized and page 8 is signed where indicated.
 5. Proof of liability insurance must be submitted with application. Certificate holder **must be** listed as:
Alabama Licensing Board for General Contractors, 2525 Fairlane Dr., Montgomery, AL 36116
 6. All entities are required by the Alabama Secretary of State (www.sos.alabama.gov or 334-242-5324) to qualify to do business in Alabama. The Certificate of Existence provided by the Alabama Secretary of State must be filed with this application. Certificate must be dated in the year in which you are applying.
(Not applicable to individuals and general partnerships).
 7. **The Qualifying Party Form** – included in the application must be submitted with the application, complete with qualifiers information (*Tax Id numbers may not be substituted for social security numbers*). You may photo copy the form if needed.
 8. The Board's *Confidential Financial Statements, Equipment Questionnaire and Experience Statement (CFS)* booklet must be completed by an **independent CPA or licensed public accountant** with **current financial information** (less than one year old). The booklet is separate from the following application form and may be downloaded from the Board's website, or obtained from the Board's office. **The Board will only accept the CFS or the Alabama Department of Transportation Booklet.** Prior to applying each applicant should discuss the Board's \$10,000 minimum net worth **and** working capital requirement with their CPA. Applicant's not meeting this requirement will not qualify for a bid limit.
 9. **Work Experience** - items 4a and 4b on page 12 of the *Confidential Financial Statements, Equipment Questionnaire and Experience Statement* booklet must be completed by the **applicant**. The work experience section is very important to your application. The Board will review this information to determine your level of experience in each classification type requested (see applicant's work sheet to determine Classification(s) requested). **Also include a resume of Principal Individuals in your organization on item 3, page 12.**
 10. The **Bank Authorization Statement** included in the application must be signed and submitted with the application. This form authorizes the applicant's bank to provide the Board with verification of assets listed by your CPA on schedule 1 of the balance sheet. This **must** also coincide with the bank accounts listed on page 4 of the *Confidential Financial Statements, Equipment Questionnaire and Experience Statement*.

11. A complete application must be on file in our office before anyone can register for examination.

EXAMINATIONS: All applicants are required to obtain a passing score on:

**Business and Project Management and/or Skill Test Examination on the classification(s) in which they are applying.
*It is the applicant's responsibility to submit passing test scores to the Board***

The administrator of the exam will be Psychological Services Inc. (PSI).
You can reach PSI online at www.psiexams.com or 1-800-733-9267

NOTICE: This office should be notified immediately in writing of any change of mailing address or any other pertinent information.
All correspondence from this office will be mailed to the last known mailing address on file.
We are not responsible for lost or undeliverable mail.

OBTAINING YOUR GENERAL CONTRACTORS LICENSE DOES NOT EXEMPT YOU OR YOUR COMPANY FROM ANY OTHER LAWS, BOARDS OR COMMISSIONS.

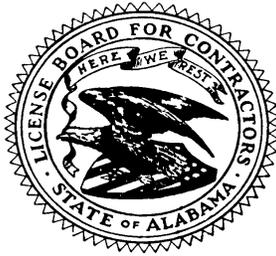
The privilege license required by the State/County is separate from the Board's license to contract as a general contractor.

Reciprocity: If you have had a license for three (3) consecutive years with any of the following Boards, you may qualify for reciprocity from this Board: Arkansas, Louisiana, Mississippi or Tennessee General Contractors Board, North Carolina State Board of Electrical Contractors. The Qualifying Party for Alabama **must** be the same as the Qualifying Party for the reciprocal state.

****Application must be on file for 30 days before receiving license through reciprocity agreement****

The General Contractor Licensing Law - Chapter 8 of Title 34 and the Board's Rules and Regulations may be downloaded from our website (www.genconbd.alabama.gov) or obtained from the Board's administrative office in Montgomery.

****It is the applicant's responsibility to ensure that all required information is submitted ****
(230-X--1.33 Applicant's Burden To Supply All Information)



For Office Use Only
Check Number: _____
Entered By: _____
Date: _____
Log Number: _____

APPLICATION FOR PRIME TO PRACTICE GENERAL CONTRACTING

NOTE: ALABAMA LAW **DOES NOT** ALLOW FOR THE REFUND OF APPLICATION FEES
 (1986 Legislative Amendment: Section 34-8-2(b); *Application Fees are for Administration and Enforcement*)
Application Forms may be downloaded at genconbd.alabama.gov

2525 FAIRLANE DRIVE
 MONTGOMERY, ALABAMA 36116
 (mailing and physical address)

PHONE (334) 272-5030
 FAX (334) 395-5336

TO THE ALABAMA LICENSING BOARD FOR GENERAL CONTRACTORS: Application is hereby made for license to engage in the practice of GENERAL CONTRACTING in Alabama, under the provisions of Title 34, Chapter 8, Code of Alabama, 1975, and the *Rules and Regulations* adopted and promulgated by the State Licensing Board for General Contractors under authority vested in it by the said act. This application is accompanied by a Certified Check, Cashier's Check or Money Order for \$300 dollars, payable to the order of the Alabama Licensing Board for General Contractors, the application fee as provided for by the Act. I understand that failure to fully answer all of the following questions and/or to furnish the required supporting papers, completely executed, will be sufficient grounds for rejecting this application. I further understand that submission of this application fee provides me one year (from date of receipt by Board) to meet the above requirements.

Company Name: _____
Style Of Business: Individual Partnership Corporation LLC LLP

Fictitious Name (corporations only –No DBAs): _____
 (Per Alabama Secretary of State ONLY)

Mailing Address: _____

City _____ State _____ Zip _____

Telephone Number (_____) _____ Fax Number (_____) _____

Contact Name: _____ Contact Number :(_____) _____

Email Address: _____

License No: (*if previously licensed by this Board*) _____

State and License No. of each general contractor's license you currently hold (attach page(s) if necessary): _____

IF CORPORATION

State and Date of Incorporation: _____ / _____

Has the corporation filed with Alabama Secretary Of State's Office to do business in Alabama? Yes _____ Date _____
 (*license cannot be issued until date is shown*)

Original Certificate of Existence required from the Alabama Secretary of State
Certificate must be dated in the in which you are applying.

CORPORATE OFFICERS

President _____ Vice President _____

Secretary _____ Treasurer _____

Major Stockholders:

Name	Percent Owned

Must Equal 100%*

IF PARTNERSHIP

Limited *General*

State and Date Formed: _____ / _____

Has the entity filed with Alabama Secretary Of State's Office to do business in Alabama? Yes _____ Date _____

(license cannot be issued until date is shown) Not applicable to general partnerships.

Original Certificate of Existence required from the Alabama Secretary of State

Certificate must be dated in the in which you are applying.

Name Of Partners/Members: 1.) _____ 2.) _____

and Percentage Owned

(must equal 100%) 3.) _____ 4.) _____

Are any partners engaged in any other line of business? YES ____ NO ____ If so, give particulars. (Attach details)

IF LLC

State and Date Formed: _____ / _____

Has the entity filed with Alabama Secretary Of State's Office to do business in Alabama? Yes _____ Date _____

(license cannot be issued until date is shown)

Original Certificate of Existence required from the Alabama Secretary of State

Certificate must be dated in the in which you are applying.

Name of Members 1.) _____ 2.) _____

and Percentage Owned

(must equal 100%) 3.) _____ 4.) _____

Are any members engaged in any other line of business? YES ____ NO ____ If so, give particulars. (Attach details)

Experience Statement: (state ONLY your commercial/industrial experience for the last three (3) years)

List employees currently in the following positions and/or your experience in the position(s) listed below.

This experience should match the classification(s) requested within this application.

You may attach additional page(s) of experience if necessary.

Experience	Name of Employee	For What Company	How Long
Superintendent			
Foreman			
Project Mgr			
Other			

YES	NO	If you answer "YES" to any of the questions below, please provide a full explanation on a separate sheet of paper
		1. Has the company, any of its members/officers/individuals, or any corporation/firm/individual of which this company is a successor ever compromised with creditors, become bankrupt, or in any way become discharged from debt other than by payment in full? If yes, attach details in a confidential letter.
		2. Has an individual, manager, officer or member of the executive staff of your organization been convicted or pled guilty to any bid rigging related charge? If yes, attach details in a confidential letter.
		3. Within the past 7 years, did you or any company of which you were either a partner or officer have any professional or business license revoked or suspended?
		4. Are there any liens for labor or materials filed on any of your work or the work of any firm of which you are a partner or officer?
		5. Within the past 7 years, were you or any company of which you were either a partner or officer sued because of a matter involving a construction business?

REFERENCES WILL SERVE AS A MEANS FOR THE BOARD TO VALIDATE THE WORK EXPERIENCE YOU HAVE PROVIDED ON PAGE 12 OF THE ***CONFIDENTIAL FINANCIAL STATEMENT, WORK EXPERIENCE & EQUIPMENT QUESTIONNAIRE*** BOOKLET. Please identify below reference contacts for each reference requirement. Address, Phone and Fax information must be provided for each. Incomplete information will result in a delay of the application process. Reference contacts will **ONLY** be notified in writing **twice**. If your reference does not respond in a timely manner, you will be required to supply additional reference information.

You may use two (2) Architect/Engineer or two (2) General Contractors in lieu of one of each

LICENSED ARCHITECT/ENGINEER For Whom You Have Completed Work	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
If you need to list <u>another</u> Architect or Engineer reference use this space.	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
BANK Must be coincide with bank(s) listed on page 6 of this application as well as page 4 of the Confidential Financial Statement Booklet.	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
If you need to list <u>another</u> Bank reference use this space.	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
LICENSED GENERAL CONTRACTOR (Does not have to be an Alabama contractor)	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
If you need to list <u>another</u> General Contractor reference use this space.	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		
Material Supplier/Dealer	Name		Contact Person		
	Address		City	State	Zip
	Phone No.	Fax No.	Email Address (optional)		

THE BOARD SHALL CLASSIFY CONTRACTORS ACCORDING TO THE TYPE OR TYPES OF CONTRACTS ON WHICH THEY MAY PERFORM , WITHIN MAXIMUM BID LIMITS AND BASED UPON DOCUMENTED WORK EXPERIENCE (see page 12 Confidential Financial Statement, Work Experience & Equipment Booklet) Classification of licenses must be requested within the four MAJOR CLASSIFICATIONS of Building Construction, Highways & Streets, Municipal & Utility and Heavy & Railroad. Applicants must have a minimum of three projects within the last three (3) years completed for each SUB-CLASSIFICATION listed in order to qualify for that Major Classification. Applicants not qualifying for a Major Classification should request a sub-classification(s) and/or Specialty Classification(s) (below) for which their work experience qualifies.

- BUILDING CONSTRUCTION:** Construction of commercial or industrial building structures intended for use for shelter, protection, comfort or convenience; Excavation and Foundations for building construction; and work incidental to Building Construction.
- HIGHWAYS & STREETS:** Construction of Roads, Streets, Alleys, Sidewalks, Curb & Gutter, Guardrails, Fences, Parkways, Parking Areas, Runways, Bridges, Grading, Drainage, Landscaping, and all work incidental to Highway and Street Construction.
- MUNICIPAL & UTILITY:** Clearing, grubbing, grading, paving, curbs, gutters, walks, driveways, swimming pools, sewer projects, water projects, gas projects, electric projects, telephone projects, and all work incidental to Municipal and Utility Construction.
- HEAVY & RAILROAD:** Construction of Railroads, Bridges, Foundations, Pile Driving, Piers, Abutments, Retaining Walls, Viaducts, Tunnels, Subways, Drainage Projects, Aqueducts, Irrigation Projects, Flood Control Projects, Water Power Development, Hydro-Electric Development, Transmission Lines, Pipe Lines, Locks, Dams, Dikes, Levees, Revetments, Channels, Breakwaters, Docks, Harbors, Industrial Projects, Excavation, Clearing, Grubbing, and all work incidental Heavy and Railroad Construction.

SPECIALTY CLASSIFICATIONS are assigned for construction, erection, alteration, modifications or additions requiring specific skills and/or trade or crafts for any particular part of the work, and work incidental thereto. Applicants with qualifying work experience may request one or more Specialty(s) (below) or a specific sub-classification(s) (above). Applicants must have completed three (3) projects in the last three (3) years for each specialty classification and/or sub-classification requested.

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Mechanical* | <input type="checkbox"/> Underground Piping | <input type="checkbox"/> Drainage | <input type="checkbox"/> Metal Buildings |
| <input type="checkbox"/> HVAC* | <input type="checkbox"/> Demolition | <input type="checkbox"/> Concrete | <input type="checkbox"/> Equip. Handling Systems |
| <input type="checkbox"/> Electrical* | <input type="checkbox"/> Golf Course | <input type="checkbox"/> Clearing/Grubbing | <input type="checkbox"/> Structural Concrete |
| <input type="checkbox"/> Plumbing* | <input type="checkbox"/> Recreational Areas | <input type="checkbox"/> Earthwork | <input type="checkbox"/> Streets |
| <input type="checkbox"/> Swimming Pools | <input type="checkbox"/> Landscaping* | <input type="checkbox"/> Excavation | <input type="checkbox"/> Environmental* |
| <input type="checkbox"/> Sprinkler Systems | <input type="checkbox"/> Remodeling | <input type="checkbox"/> ROW Maintenance | <input type="checkbox"/> Masonry |
| <input type="checkbox"/> Sheet Metal | <input type="checkbox"/> Renovations | <input type="checkbox"/> Traffic Control and Safety | <input type="checkbox"/> Bridges |
| <input type="checkbox"/> Roofing/Siding | <input type="checkbox"/> Asbestos* | <input type="checkbox"/> Erection of Structural Steel | <input type="checkbox"/> POL Dispensing Systems |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Maintenance & Repair | <input type="checkbox"/> Miscellaneous Steel | |

Other: Write in requested classification if it is not listed above.

***Alabama Certification Card(s)** – If Applicable from the appropriate Alabama State Board that applies:
i.e. E: Electrical – an electrical card; M: Mechanical – must have a plumbers and heating and air card.

The following is a sample listing of certificates needed:
 Heating, Air Conditioning, & Refrigeration; Plumbers & Gasfitters; Electrical; Onsite Wastewater; Alabama Electronic Security Board; Dept. of Agriculture; Dept. of Environmental Management; Dept. of Labor; Dept. of Insurance Fire Marshal’s Office.

Plumber’s card must be a Master Plumber.
***Electrical cards must be an Electrical Contractor or Master Electrician. ***
*****No Local cards/certificates accepted*****

Act No. 91-473, Acts of Alabama (1991), requires the collection of \$100 of your application fee to “ be distributed by the State Licensing Board for General Contractors at the end of each licensing period to all accredited public institutions of higher education of American Council for Construction Education accredited courses in building science and to all accredited public institutions of higher education offering courses in building science who are in the candidate status of the American Council for Construction Education and to institutions of higher education offering courses leading to a Bachelor of Civil Engineering degree which offers courses in highway engineering and construction of the undergraduate and graduate levels whose civil engineering program is accredited by the Engineering Accreditation Commission of the Accreditation Board for Engineering and Technology (ABET)”.

PLEASE SELECT (X) ONE OF THE FOLLOWING TO INDICATE THE PROGRAM YOU WISH TO SUPPORT:

_____ Building Science (general construction) _____ Civil Engineering (highway eng and/or construction)
No Additional Fee Required

The Undersigned hereby represent(s) that the foregoing statements and answers to interrogatories are true to the best of his knowledge, information and belief.

Owner/Principle (printed name): _____ Date: _____

Owner/Principle (Signature): _____ SSN: _____
Social Security No. of Signer

AFFIDAVIT

STATE OF _____ CITY OF _____ COUNTY OF _____

Subscribed and sworn to before me, the undersigned Notary Public, in and for the State and City or County aforesaid this _____ day of _____ in the year _____ .

My commission expires: _____

Notary Public

Notary Signature

SEAL

CITIZENSHIP VERIFICATION

Are you a US Citizen? yes: _____ no: _____ If “**yes**” please read the declaration below and sign.

If “**no**”, see the question below.

*I hereby declare that I am a citizen of the United States of America and,
I sign this declaration under penalties of perjury: making a false, fictitious, or fraudulent statement or
representation in this declaration is perjury in the second degree pursuant to Ala. Code § 13A-10-102.
I hereby declare that all information submitted is complete, true and correct in accordance with the Code of
Alabama 1975 § 34-8-1 et seq.*

Provide proof by submitting one of the items listed on page 9.

<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
<i>Declaration must be signed by the individual if the applicant is an individual, by the duly authorized officer if a corporation, by an authorized member if a LLC or by a general partner if a partnership.</i>		

----- **OR** -----

If you are not a citizen of the United States, are you an alien who is lawfully present in the United States of America?
yes: _____ no: _____ If “**yes**”, please read the declaration below and sign.

*I hereby declare that I am an alien lawfully present in the United States of America.
I sign this declaration under penalties of perjury: making a false, fictitious or fraudulent statement or representation in
this declaration is perjury in the second degree pursuant to Ala. Code § 13A-10-102.*

Provide proof by submitting one of the items listed on page 9.

<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
<i>Declaration must be signed by the individual if the applicant is an individual, by the duly authorized officer if a corporation, by an authorized member if a LLC or by a general partner if a partnership.</i>		

PROOF OF CITIZENSHIP

Code of Alabama 1975, Section 31-13-29(g)

From Act 2012-491

- 1) A driver's license or nondriver's identification card issued by the Alabama Department of Public Safety or the equivalent governmental agency of another state within the United States, provided that the governmental agency of another state within the United States requires proof of lawful presence in the United States as a condition of issuance of the driver's license or nondriver's identification card.
- 2) A birth certificate indicating birth in the United States or one of its territories.
- 3) Pertinent pages of a United States valid or expired passport identifying the person and the person's passport number, or the person's United States passport.
- 4) United States naturalization documents or the number of the certificate of naturalization.
- 5) Other documents or methods of proof of United States citizenship issued by the federal government pursuant to the Immigration and Nationality Act of 1952, as amended.
- 6) Bureau of Indian Affairs card number, tribal treaty card number, or tribal enrollment number.
- 7) A consular report of birth abroad of a citizen of the United States of America.
- 8) A certificate of citizenship issued by the United States Citizenship and Immigration Services.
- 9) A certification of report of birth issued by the United States Department of State.
- 10) An American Indian card, with KIC classification, issued by the United States Department of Homeland Security.
- 11) Final adoption decree showing the person's name and United States birthplace.
- 12) An official United States military record of service showing the applicant's place of birth in the United States.
- 13) An extract from a United States hospital record of birth created at the time of the person's birth indicating the place of birth in the United States.
- 14) AL-verify.
- 15) A valid Uniformed Services Privileges and Identification Card.
- 16) Any other form of identification that the Alabama Department of Revenue authorizes, through an administrative rule promulgated pursuant to the Alabama Administrative Procedure Act, to be used to demonstrate or confirm a person's United States citizenship or lawful presence in the United States, provided that the identification requires proof of lawful presence in the United States as a condition of issuance.

PROOF LAWFUL PRESENCE OF NON-CITIZEN

Code of Alabama 1975, Section 31-13-3(10)

- a) A valid, unexpired Alabama driver's license.
- b) A valid, unexpired Alabama nondriver identification card.
- c) A valid tribal enrollment card or other form of tribal identification bearing a photograph or other biometric identifier.
- d) Any valid United States federal or state government issued identification document bearing a photograph or other biometric identifier, including a valid Uniformed Services Privileges and Identification Card if issued by an entity that requires proof of lawful presence in the United States before issuance.
- e) A foreign passport with an unexpired United States Visa and a corresponding stamp or notation by the United States Department of Homeland Security indicating the bearer's admission to the United States.
- f) A foreign passport issued by a visa waiver country with the corresponding entry stamp and unexpired duration of stay annotation or an I-94W form by the United States Department of Homeland Security indicating the bearer's admission to the United States.

BANK AUTHORIZATION TO RELEASE APPLICANT INFORMATION

ACCOUNT NO(s): _____ RE: _____

_____ (Name of Applicant for License)
_____ (Street Address or P.O. Box)
_____ (City State Zip)

DATE: _____ TO: _____
_____ (NAME OF BANK)
_____ (STREE ADDRESS OR P.O. BOX)
_____ (CITY) (STATE) (ZIP)

CONTACT PERSON: _____
PHONE: _____ FAX: _____
EMAIL ADDRESS: _____

This will authorize the above referenced bank to furnish the State of Alabama Licensing Board for General Contractors any information relative to my account with your bank, and/or credit experience with me or my firm. Your furnishing this information to this Board will expedite their action on my application for license.

Sincerely,

(signature)

(name of firm)

STATE 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

All applicants are required to take the ***Business and Project Management for Contractors Examination and/or Trade Examination***

Examinations are administered by PSI (Psychological Services Inc). This completed form must accompany your application for license

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. The same email address cannot be used for multiple qualifiers.

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)

ALABAMA LICENSING BOARD FOR GENERAL CONTRACTORS
2525 Fairlane Drive, Montgomery, Alabama 36116
(334) 272-5030 – Phone (334) 395-5336 – Fax
www.genconbd.alabama.gov

OUT OF STATE LICENSE VERIFICATION
PRIME CONTRACTORS ONLY

Company Name _____
Street Address _____
City _____ State _____ Zip _____

Instructions For Verification
Insert your name and address, and complete the top portion of this request. Send the form to the appropriate state. The verifying state will mail the completed form to us at the above address.

**** THIS ONLY APPLIES IF YOU HAVE BEEN LICENSED FOR 3 CONSECUTIVE YEARS IN: ****
Mississippi, Tennessee, Louisiana, Arkansas or (North Carolina -electrical board only)

I am/have been licensed in the State of _____ issued under the company name of _____
_____.

I authorize you to release to the Alabama Licensing Board for General Contractors all information pertaining to license number _____
_____.

Printed Name of Applicant

Signature of Applicant

TO VERIFYING STATE: Please furnish the information requested. Sign and verify the information. Return the completed form to the Alabama Licensing Board for General Contractors by mail.

Company Name: _____

Business Type: Individual Partnership Corporation LLC LLP Other

Type of License (classification): _____

License Number: _____ Date License Issued: _____ Expiration Date: _____

Has the above applicant received disciplinary action? Yes _____ No _____ Explain _____

_____ Current status of license _____

Licensed by: Waiver of Exam (basis of waiver) _____

Endorsement from the State of _____

Examination: Name of Qualifier _____

Type of Exam(s) _____ Exam Score _____

Signature

Title

Date

Agency Name

State