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

Complete the top portion of this form. **Send the form to the appropriate state.** The verifying state will mail the completed form to you to be included in your application packet.

**** 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 applicant listed above 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**