



# CHANGE OF ADDRESS FORM

P.O. Box 303605 | Montgomery, Alabama 36130-3605 | **Overnight Delivery:** 445 Herron Street | Montgomery, Alabama 36104  
Telephone (334) 242-2230 | Facsimile (334) 263-1397

**NOTE:** All licensees are required by law to notify the Board of any address change within **60 days** of the change. Failure to notify the Board could result in disciplinary action or even revocation of license should you not receive legal notification of any agency action.

**MAIL COMPLETED AND SIGNED FORM TO:**

Home Builders Licensure Board, P.O. Box 303605, Montgomery, AL 36130-3605  
or 445 Herron Street, Montgomery, AL 36104 (for overnight delivery).

Date: \_\_\_\_\_

License/File No.: \_\_\_\_\_

Individual or Company Name \_\_\_\_\_  
(As shown on current Home Builders license)

**OLD ADDRESS**

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

**NEW ADDRESS**

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

**• I AM CHANGING:**

- Physical Address Only
- Mailing Address Only
- BOTH - Physical and Mailing Address are the same.

\_\_\_\_\_  
Printed Name of Individual/Designated Qualifying Representative

\_\_\_\_\_  
Signature of Individual/Designated Qualifying Representative