**www.hblb.alabama.gov**

**EXPIRED INACTIVE UNLIMITED LICENSE APPLICATION**

**(INDIVIDUAL AND BUILDING OFFICIAL)**

P.O. Box 303605 • Montgomery, Alabama 36130-3605 / **Overnight Delivery:** 445 Herron Street • Montgomery, Alabama 36104

**Telephone** (334) 242-2230 / **Facsimile** (334) 263-1397

**OFFICE USE ONLY**

Check No.

(Date Stamp)

Amount Paid

(No Fee Charged to Building Officials)

**INSTRUCTIONS:** Please type or print in ink all information. Copies or facsimile transmissions will not be accepted. **ALL QUESTIONS MUST BE ANSWERED COMPLETELY.** Make check, cashier’s check, certified check, or money order for **$175.00** **($125 inactive license fee plus $50 non-refundable application processing fee for an expired license)** payable to the Home Builders Licensure Board. The Board does not accept cash or payments by credit card. ***All fees must be paid before the application will be processed. Building Officials are exempt from paying the fee.***

**NOTICE: 1)** Holding an inactive license does not allow you to engage in any residential construction activity for which a license is required. 2) Your inactive license application must be filed prior to the date your current license expires. 3) Inactive licenses must be renewed annually.

**☐ Yes ☐ No I have read and understood the above statements.**

**SECTION 1: APPLICANT INFORMATION**

Full Name

Social Security Number Previous License Number

Year License Expired

(Disclosure mandatory under the Alabama Child Support Reform Act of 1997, Act 97-447, Ala. Code §30-3-194 (1975) to be used for the purposes described therein.)

Mailing Address

City County State Zip

Business Phone ( ) Cellular Phone ( )

Fax ( ) E-mail Address

**Check if above information is the same for Physical Address.**

Physical Street Address

City County State Zip

**SECTION 2: APPLICANT BACKGROUND AND BUSINESS HISTORY**

☐ Yes ☐ No 1. Do you, or any entity of which you are the Designated Qualifying Representative, have any outstanding

disciplinary actions before this Board?

**If “YES,”** provide the name of the homeowner involved:

☐ Yes ☐ No 2. Since this license was last placed on inactive status, have you, or any company of which you were either a partner, officer, member, or manager been identified by this Board as an unlicensed builder?

**SECTION 3: BUILDING OFFICIALS (To be completed by Building Officials ONLY. You must mark either A or B)**

I am a Building Official or Building Inspector.

I am an employee of jurisdiction.

**ATTACH PROOF OF EMPLOYEMENT AS A BUILDING OFFICIAL OR BUILDING INSPECTOR.**

By virtue of employment, I am exempt or prohibited from holding a license;

**— AND —**

AI currently hold the following S.B.C.C.I. or I.CL.C. certifications: …**ATTACH COPY OF CERTIFICATE**…

Certified/Chief Building Official Residential Building Inspector Building Plans Examiner

Building Inspector Property Maintenance and Housing Inspector Design Professional

Deputy Building Official Housing Inspector Plan Reviewer

**— OR —**

BI do not maintain any of the above certifications. I hereby request to submit evidence to the Board to demonstrate that I possess sufficient building qualifications and experience to receive a license.

## SECTION 4: OATH AND RELEASE FOR INDIVIDUALS

I solemnly swear or affirm that I am the person referred to in this application; that the information provided, and the statements made herein and on the attachments hereto are accurate, complete, and true to the best of my knowledge; that the information provided and statements made on all applications continue to be accurate, complete, and true to the best of my knowledge, except as otherwise reported on this application; and further, that if granted a license by the Home Builders Licensure Board, I shall abide by all laws relating to residential home builders and the rules adopted by the Board.

**☐ Yes ☐ No I have read and understood the above statement.**

I hereby authorize any individual, company, or institution with whom I have been associated to release to the Home Builders Licensure Board all information and records as are necessary to verify or contradict the information provided in this application.

**☐ Yes ☐ No I have read and understood the above statement**

Printed Name of Individual Applicant

Signature of Individual Applicant