

INACTIVE LIMITED LICENSE APPLICATION (CORPORATIONS, PARTNERSHIPS & LIMITED LIABILITY COMPANIES)

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
(Date Stamp)	Check No
	Amount Paid
NSTRUCTIONS: Please type or print in in	k all information. Copies or facsimile transmissions will not be accepted. <u>A</u>

INSTRUCTIONS: Please type or print in ink all information. Copies or facsimile transmissions will not be accepted. <u>ALL</u> <u>QUESTIONS MUST BE ANSWERED COMPLETELY.</u> The annual inactive license fee is \$125.00. Make check, cashier's check, certified check, or money order 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.*

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

Business Name			
License/File Number			
Mailing Address			
City	County	State	_ Zip
Business Phone ()	E-mail Address		
Designated Qualifying Representative's Nan	ne		
Social Security Number of Designated Qual	ifying Representative (DQR) – Provide Last 4 I	(Disclosure mandatory under Reform Act of 1997, Act	
	nated qualifying representative, either individua outstanding disciplinary actions before this Boa		
If "YES", provide the name of the homeown	er involved:		

NOTICE: BOTH SECTIONS 2 AND 3 MUST BE SIGNED AND NOTARIZED.

SECTION 2: OATH AND RELEASE FOR DESIGNATED QUALIFYING REPRESENTATIVE (DQR)

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 for the applicant named here and for which I have been the qualifying representative continue to be accurate, complete and true to the best of my knowledge, except as otherwise reported on this renewal application; and further, that if the Home Builders Licensure Board recognizes me as a qualifying representative, I shall abide by all laws relating to residential home builders and the rules adopted by the Board.

\Box Yes \Box No I have read and understood the above statement.

I solemnly swear and affirm that I continue to meet the requirements to serve as the qualifying representative, including but not limited to occupying the required position within the corporation, partnership, or limited liability company.

 \Box Yes \Box No I have read and understood the above statement.

SECTION 2: (continued)

I hereby authorize any individual, company, or institution with whom the applicant has 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.

\Box Yes \Box No I have read and understood the above	ve statement
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Printed Name of Designated Qualifying Repres	sentative [DQR] (Must be a General Partner, Officer, Member, or Manager)
Signature of Designated Qualifying Represent	rative [DQR] (Must be a General Partner, Officer, Member, or Manager)
Social Security Number of DQR	(Disclosure mandatory under the Alabama Child Support Reform Act of 1997, Act
Provide Last 4 Digits: XXX-XX-	97.447, Ala. Code §30.3-194 (1975) to be used for the purposes described therein.)
Position Held	
County of)	
State of)	
Signed and sworn to before me thisday of),, (Notarial Seal)
Signature – Notary Public	
My Commission Expires:	

SECTION 3: OATH AND RELEASE FOR CORPORATIONS, PARTNERSHIPS, OR LIMITED LIABILITY COMPANIES

I solemnly swear or affirm that I am authorized to execute this application on behalf of the applicant; that I have actual knowledge of the statements made herein and on the attachments hereto and that such statements 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 renewal application; and further, that if the applicant is granted a license by the Home Builders Licensure Board, I shall use my best efforts to ensure that the applicant abides by all laws relating to residential home builders and the rules adopted by the Board.

 \Box Yes \Box No I have read and understood the above statement.

I hereby authorize any individual, company, or institution with whom the applicant has 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.

\Box Yes \Box No I have read and understood the above statem
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Printed Name of Authorized General Partner, Officer, Member, or Manager

Signature of Authorized General Partner, Officer, Member, or Manager

Position Held	
County of)	
State of)	
Signed and sworn to before me thisday of,,,,,	. (Notarial Seal)
Signature – Notary Public	_
My Commission Expires:	

NOTICE: BOTH SECTIONS 2 AND 3 MUST BE SIGNED AND NOTARIZED.