

2024 UNLIMITED RENEWAL LICENSE APPLICATION (CORPORATIONS, PARTNERSHIPS & LIMITED LIABILITY COMPANIES)

www.hblb.alabama.gov

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	Telephone (334) 242-2230 / Facsir	nile (334) 263-1397	
	OFFICE USE ON		
		License Fee \$	
(Date Stamp)		Late Fee \$	
		Total Paid \$	
		Check No.	
	the box below. If the information is INC please enter the <u>correct</u> contact informat		Y , CHECK HERE \Box
STOP REPRESENTA CONTACT TH	I OF YOUR BUSINESS HAS CHA TIVE (DQR) HAS CHANGED, <u>D</u> E LICENSURE DIVISION FOR TH	O NOT COMPLETE THIS	
License File No.			
List any and all business names/tr	ade names you plan to use to perform resic	lential construction:	
Physical Address			
City	County	State	Zip
□Check if above	information is the same for Mailing Addr	ess.	
Mailing Address			
City	County	State	Zip

Fax (______) _____E-mail Address _____

INSTRUCTIONS: Please type or print in ink all information. Facsimile transmissions will not be accepted. All questions on the front and back of this application must be answered completely. Use additional sheets if necessary. The annual license fee is \$250.00. Make check, cashier's check, certified check, or money order payable to the Home Builders Licensure Board. Your fee must be paid before your application will be processed. **The deadline for renewal applications is November 30, 2023.** A \$50.00 late fee must accompany any renewal application postmarked* on or after December 1, 2023. **Your 2023 license expires December 31, 2023.**

Business Phone (_____)____Cellular Phone (_____)___

*The term "postmarked" means postmarked by the U.S. Postal Service, not metered.

NOTICE: Submitting false information for the purpose of obtaining a license is a criminal offense and grounds for license denial. A corporation, partnership or limited liability company license allows you to engage in residential construction only in the name of the company granted the license. A corporation, partnership or limited liability company license allows one person to serve as the designated qualifying representative. Other partners, officers, members, or managers desiring a license should apply for an individual license.

CONTINUING EDUCATION REQUIREMENTS: All licensees under the age of 60 as of October 1, 2023 (individual renewal applicants and/or the designated qualifying representative for corporate renewal applicants) must have completed six (6) credit hours of continuing education. Licensees submitting a renewal application for <u>the first time</u> are not required to complete continuing education.

SECTION 1: APPLICANT BACKGROUND AND BUSINESS HISTORY

IF YOU ANSWER "YES" TO ANY OF THE FOLLOWING QUESTIONS, YOU MUST PROVIDE THE REQUESTED DOCUMENTATION AND A FULL EXPLANATION ON A SEPARATE SHEET OF PAPER.

Your application will not be processed until <u>all required documentation</u> has been received.

- □ Yes □ No 1. During the past year, has any partner, officer, member, or manager of this company pled guilty or nolo contendere, or been convicted of a felony?
- □ Yes □ No 2. During the past year, did this company, or any partner, officer, member, or manager or any entity of which this company is a successor, been declared or placed in bankruptcy?

If "YES," indicate in the full explanation whether the bankruptcy was filed under Chapter 7, 11 or 13 of the U.S. Bankruptcy Code.

If the bankruptcy was filed under **Chapter 13**, provide a schedule of creditors, a payment plan and a history of payments. If the bankruptcy was filed under **Chapter 11**, provide a reorganization plan. If the bankruptcy was filed under **Chapter 7**, provide a schedule of creditors. If the bankruptcy has been **discharged**, provide a copy of the discharge order.

□ Yes □ No 3. During the past year, did this company or any partner, officer, member, or manager, or any entity of which this company is a successor, have any professional or business license revoked or suspended in Alabama or any other state, or have an application for any professional license or business license denied in Alabama or any other state?

If "YES," provide a copy of the revocation, suspension, or denial order with your written explanation.

□ Yes □ No 4. Does this applicant, or the applicant's Designated Qualifying Representative (DQR), either individually or as the Designated Qualifying Representative (DQR) of any other entity, have any outstanding disciplinary actions before this Board?

If "YES," provide the name of the homeowner involved:

□Yes □No 5. During the past year, were there any liens filed against this company, or any partner, officer, member, or manager, or any entity of which this company is a successor?

If "YES," provide a copy of the lien filing, and the release of lien if the lien has been released, with your explanation.

SECTION 2: BUSINESS-RELATED FINANCIAL INFORMATION

A credit report must be provided directly to the Board's offices by a credit reporting agency.

Disclosure of Social Security Number for the purpose of obtaining business-related financial and credit information and public records search is voluntary. Disclosure request under Ala. Code § 24.14A.7(a)(4).

(Continued on page 3)

REQUIRED - BOTH SECTIONS 3 AND 4 MUST BE SIGNED

SECTION 3: OATHAND 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.

☐ Yes ☐ 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.

□ Yes □ No I have read and understood the above statement

Printed Name of Designated Qualifying Representative [DQR] (Must be a General Partner, Officer, Member, or Manager) Position Held

Signature of Designated Qualifying Representative [DQR] (Must be a General Partner, Officer, Member, or Manager)

Social Security Number of DQR Provide Last 4 Digits: XXX - XX -

(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.)

SECTION 4: 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 statement.

Printed Name of Authorized General Partner, Officer, Member, or Manager

Position Held

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

REQUIRED - BOTH SECTIONS 3 AND 4 MUST BE SIGNED