



# HOME BUILDERS LICENSURE BOARD

www.hblb.alabama.gov

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

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

<b>OFFICE USE ONLY</b>	
(Date Stamp)	License Fee \$ _____ Late Fee \$ _____ Total Paid \$ _____ Check No. _____

**⚠ Review the information in the box below. If the information is INCORRECT or the BOX IS EMPTY, CHECK HERE  AND please enter the correct contact information in the spaces provided below. ⚠**

License File No. \_\_\_\_\_

Physical Address \_\_\_\_\_

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

Check if above information is the same for Mailing Address.

Mailing Address \_\_\_\_\_

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

Business Phone (\_\_\_\_\_) \_\_\_\_\_ Cellular Phone (\_\_\_\_\_) \_\_\_\_\_

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 inactive license fee is \$125.00. 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.**

*\*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 roofing 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:** Licensees submitting an inactive renewal application are not required to complete continuing education; however, inactive licensees must complete six (6) hours of continuing education to regain an active status. All licensees age of 60 or over as of October 1<sup>st</sup> of the current calendar year (individual renewal applicants and/or the designated qualifying representative for corporate renewal applicants), upon submission of a Continuing Education Age Exemption Form, are exempt from the continuing education requirement.

**REQUIRED - BOTH SECTIONS 1 AND 2 MUST BE SIGNED**

**SECTION 1: 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.

Yes  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 2: 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.

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 Authorized General Partner, Officer, Member, or Manager

\_\_\_\_\_  
Position Held

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

**REQUIRED - BOTH SECTIONS 1 AND 2 MUST BE SIGNED**