



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

2025 LIMITED RENEWAL LICENSE APPLICATION (INDIVIDUAL)

OFFICE USE ONLY
(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.

[Empty box for contact information]



IF YOU ARE CONDUCTING BUSINESS AS A CORPORATION, PARTNERSHIP, OR L.L.C., DO NOT COMPLETE THIS FORM. YOU MUST CONTACT THE LICENSURE DIVISION FOR THE APPROPRIATE FORMS.

License File No.

List any and all business names/trade names you plan to use to perform residential construction:

[Blank line for business names]

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 Address

City County State Zip

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, 2024. A \$50.00 late fee must accompany any renewal application postmarked\* after November 30, 2024. Your 2024 license expires December 31, 2024.

\*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. An individual license allows only the individual to engage in residential construction.

CONTINUING EDUCATION REQUIREMENTS: All licensees under the age of 60 as of October 1, 2024 (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 the first time 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 all required documentation has been received.

Yes  No 1. During the past year, did you pled guilty or nolo contendere, or been convicted of a felony?

If “YES”, provide a written explanation regarding your felony charge(s), including copies of any court documents, sentencing orders, or other relevant information to the case.

Yes  No 2. During the past year, did you or any company of which you were a partner, officer, member, or manager declare or were placed in bankruptcy?

If “YES,” provide a written explanation, including 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 you, or any company of which you are a partner, officer, member, or manager, 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 written explanation, including copy of the revocation, suspension, or denial order.

Yes  No 4. 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 5. During the past year, were there any liens filed against you, for any residential construction work performed, or the work of any company of which you are a partner, officer, member, or manager?

If “YES,” provide a written explanation, including a copy of the lien filing, and the release of lien if the lien has been released.

## 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).*

### SECTION 3: OATH AND RELEASE FOR INDIVIDUALS

I solemnly swear or affirm that I am the person referred to in this application; that the statements made herein and on the attachments hereto are accurate, complete, and true to the best of my knowledge; that the 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 granted a license renewal 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.**

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Printed Name of Individual Applicant

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Signature of Individual Applicant

Social Security Number of Individual Applicant

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.)*