

## 2026 LIMITED RENEWAL INACTIVE 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		
1 If 1 : f : : NICONDECT : 1		
		CHECK HERE LI
_		
County	State	Zip
Cellular Phone (	)	
E-mail Address		
ion is the same for Physical Address.		
ion is the same for Physical Address.		
	clow. If the information is INCORRECT or the correct contact information in the spaces of the correct contact information in the correct contact in the correct contact in the correct c	License Fee \$

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

accompany any renewal application postmarked\* after November 30, 2025. Your 2025 license expires December 31, 2025.

**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: 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.

	ard recogni	knowledge, except as otherwise reported on the zes me as a qualifying representative, I shall ab	
□ Ye	s 🗆 No	I have read and understood the above states	ment.
		meet the requirements to serve as the qualifyir the corporation, partnership, or limited liabilit	
I hereby authorize any individual, of Builders Licensure Board all information application.		I have read and understood the above stater rinstitution with whom the applicant has been rds as are necessary to verify or contradict the i	associated to release to the Home nformation provided in this
_	-	ifying Representative [DQR] r, Member, or Manager)	Position Held
Signature of Designated (Must be a General Part		g Representative [DQR] r, Member, or Manager)	
Social Security Number Provide Last 4 Digits: <i>Y</i>	-		
		(Disclosure mandatory under the Alabama Child Support Reform Act of 199' 97-447, Ala. Code §30-3-194 (1975) to be used for the purposes described the	
SECTION 2: OATH AND LIMITED LIABILITY COI		SE FOR CORPORATIONS, PA	ARTNERSHIPS, OR
of the statements made herein and on t my knowledge; that the information pro best of my knowledge, except as otherw	he attachmovided and see reported hall use my	d to execute this application on behalf of the agents hereto and that such statements are accurstatements made on all applications continue to don't his renewal application; and further, that the best efforts to ensure that the applicant abides	ate, complete, and true to the best of to be accurate, complete and true to the if the applicant is granted a license by
□ Ye	s 🗆 No	I have read and understood the above states	ment.
The state of the s		r institution with whom the applicant has been rds as are necessary to verify or contradict the i	
□ Ye	s 🗆 No	I have read and understood the above states	ment.

REQUIRED - BOTH SECTIONS 1 AND 2 MUST BE SIGNED

Position Held

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

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