Mailing Address: P.O. Box 26000, Sacramento, CA 95826 800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

# IMPORTANT NOTICE REGARDING CONVICTIONS PLEASE READ CAREFULLY

Failure to accurately report a conviction (except as explained below) may result in an application being denied. In this notice and on the application, the term "conviction" includes pleading guilty or nolo contendere or being convicted by a court of any misdemeanor or felony in this state or elsewhere.

As part of the CSLB application process and as required by law, you must be fingerprinted if you have not been fingerprinted for CSLB before or if your previous fingerprint record was purged by CSLB due to a voided application; disassociated, revoked, or cancelled license; or for some other reason. After an application is accepted by CSLB as complete (also known as "posted"), instructions about obtaining and submitting fingerprints (usually via live scan electronic transmission) will be sent to the applicant(s).

Your fingerprints will be compared to the records of the California Department of Justice and the Federal Bureau of Investigation. <u>If you have ever been convicted of a crime</u>, your criminal record information will be reported to CSLB. This includes DUIs and other Vehicle Code violations that resulted in a conviction. Even if you have had your record expunged (charges reduced or dismissed), the past conviction will still be reported to CSLB and must be disclosed on the application. However, some convictions **should NOT be disclosed**, including the following:

- Convictions that were adjudicated in a juvenile court;
- Convictions under California Health and Safety Code §11357 (b), (c), (d), or (e) or §11360 (b) that are two years old or older;
- <u>Under certain circumstances, some arrests/convictions relating to specified marijuana offenses that occurred prior to January 1, 1976, as provided in Health and Safety Code §11361.5 (b); and</u>
- <u>Under certain circumstances</u>, some arrests/convictions relating to specified drug offenses as provided in Penal Code §1000.

If you have ever been convicted of a crime (except in the four circumstances outlined above), you MUST answer "Yes" to the criminal conviction question on the application and provide a detailed explanation of the circumstances resulting in your conviction. To help ensure that you provide the required information, you should complete and submit the Disclosure Statement Regarding Criminal Plea/Conviction form that is available on CSLB's website.

Applicants with criminal convictions are not automatically denied licensure, as each application is reviewed individually based on the applicable sections of law. When reviewing criminal convictions, CSLB considers factors such as the nature and severity of the crimes, the amount of time that has passed since the convictions, and any evidence of rehabilitation submitted by the applicant.

For rehabilitation evaluation, pursuant to the California Code of Regulations §869, CSLB is generally looking for **three (3) years** to have passed after a misdemeanor conviction and **seven (7) years** to have passed after a felony conviction, without further violations of law. These timeframes are calculated from the applicant's date of release from incarceration or from the end of probation if no time was served and are subject to reduction or extension based on several factors, including the nature of the applicant's conviction history as a whole. In addition, any type of conviction could be considered substantially related to the qualifications or duties of a contractor when evaluated in the context of the applicant's entire conviction record.

Failure to accurately report any and all disclosable convictions is falsification of your application and is grounds for denial. If your application is denied, you will be prevented from filing another application for a minimum of one (1) year, and up to a maximum of five (5) years.

9821 Business Park Drive, Sacramento, CA 95827

Mailing Address: P.O. Box 26000, Sacramento, CA 95826

800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

### IMPORTANT NOTICE

### Dear Applicant:

Enclosed is the application you requested from the Contractors State License Board (CSLB).

Please be aware that nearly half of all applications submitted to CSLB are incomplete and must be rejected!

You must complete your application in its entirety for it to be accepted by CSLB. After an application has been accepted by CSLB as complete (also known as "posted"), each individual listed on the application will be sent instructions on the process for obtaining and submitting fingerprints as required by law.

An incomplete application can needlessly delay your license. Delays can last several weeks or even months and possibly result in the application being voided and the application fee being forfeited.

# Spending a few extra minutes now may <u>save</u> <u>you</u> <u>weeks</u> <u>or</u> <u>months</u> <u>later!</u>

Before you submit your application, follow these simple directions.

- > Sign the forms.
- > Fill out all applicable information.
- Make sure you submit Certification of Work Experience forms that have been filled out completely, ensuring that you have provided four (4) years of applicable experience in the classification for which you are applying.

Carefully read the General Information section that immediately precedes the application package and follow the specific instructions that are contained throughout the application package to help ensure that your application is complete.

Please be aware that there are <u>no</u> schools or application preparation organizations that are affiliated with or agents of CSLB, although some may have company names that are confusingly similar to CSLB. If you discover that an organization has misrepresented itself as being CSLB, you should submit a complaint to CSLB or the California Department of Consumer Affairs. Official CSLB examination study guides are available free of charge on CSLB's website and are mailed to applicants when they are scheduled for exams.

Governor Edmund G. Brown Jr.



9821 Business Park Drive, Sacramento, CA 95827
Mailing Address: P.O. Box 26000, Sacramento, CA 95826

800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

## APPLICATION FOR ORIGINAL CONTRACTOR LICENSE General Information

Listed below is general information to assist you as you complete the attached application. Detailed instructions are provided throughout the application package. Please refer to the Contractors State License Board's (CSLB) publication *Blueprint for Becoming a Licensed Contractor* for more detailed information about the licensing process. To receive a copy of *Blueprint*, please contact CSLB or visit the Guides and Pamphlets page on CSLB's website.

**Do not submit this General Information section with your completed application** – the actual application begins immediately following this section on Application – Page 1 of 3 and includes the Certification of Work Experience and the Construction Project Experience form, if needed. Before you submit your application, please review and check off the following items.

Enclose the nonrefundable \$300 application fee with your completed application. CSLB cannot process your application without the appropriate fee made payable to the Registrar of Contractors. (The \$180 initial license fee should be submitted separately after you pass the examination.)
Your application may be returned to you if it is insufficient or incomplete. You must provide any missing information, make corrections, and resubmit your completed application to CSLB within <b>90 days</b> after the date that it was returned to you or your application will become void. You cannot reinstate a void application – you must submit a new application and \$300 application fee if you wish to pursue licensure.
Complete the application and all accompanying forms legibly in black or dark blue ink, with a typewriter, or on CSLB's website using the form-fill feature. Forms completed in pencil will be returned to you. Please make sure that you and other appropriate individuals sign and date the forms, where applicable.
<b>Full legal names are required.</b> You must provide the full legal name of all personnel. If an individual does not have a middle name, write "None" or "No Middle Name" in the space provided. If an individual has only an initial for his or her first or middle name, write "(Initial Only)" after the initial.
<b>Leave no space blank.</b> If a particular question or request for information does not apply to you, write "N/A" in the blank space to indicate that the question has received your attention but that it is not applicable.
You must provide a street address for both your business and residence. P.O. Boxes and private mail boxes (PMB) are <b>not</b> acceptable for the street address.
You must complete the personnel information requested in Section 4 on page 2 of the application for each individual who will be listed on the license. U.S. Social Security numbers are required for <b>all</b> applicants (see page 4 of this General Information section for information on the collection of Social Security numbers).

The "#" symbol is used interchangeably with the word "number" where space is limited on the application.

The terms "qualifying individual" and "qualifier" are used interchangeably. The qualifying individual is the person who meets the experience and examination requirements for the license and who is responsible for the employer's or principal's construction operations. A qualifying individual is required for every classification on every license issued by CSLB. The qualifying individual may or may not be the owner of the business. (See *California Contractors License Law & Reference Book, Ch. 1*; or *Blueprint for Becoming a Licensed Contractor*, Questions 49-53.)

If you need additional copies of forms (e.g., Certification of Work Experience, Section 4 – Personnel Full Legal Names and Addresses), please make copies of the blank forms before you begin or print additional copies from CSLB's website.

Please be aware that CSLB will begin accepting applications for licensure from limited liability companies (LLC) no later than January 1, 2012. A separate application will be available on CSLB's website for LLC applicants.

### FINGERPRINT REQUIREMENT

All applicants for licensure are required to submit a full set of fingerprints for the purpose of conducting a criminal background check. Fingerprints will be compared to the records of the California Department of Justice and the Federal Bureau of Investigation to determine whether a criminal history exists. After an application has been accepted by CSLB as complete (also known as "posted"), each individual listed on the application will be sent instructions on the process for obtaining and submitting fingerprints as required by law. For more information, please visit CSLB's website and view information under the Applicants tab.

## APPLICATION FOR ORIGINAL CONTRACTOR LICENSE General Information

### **EXAMINATION ELIGIBILITY REQUIREMENTS**

The qualifying individual for a contractor license is required to pass the written Law and Business Examination and a specific trade examination if required, unless he or she meets the requirements for a waiver (see next page for information regarding examination waivers).

To be eligible to take an examination, the qualifying individual must have had, within the last 10 years, at least four (4) full years of experience in the classification for which he or she is applying. The experience must be at no less than a journeyman level, or as a foreman, supervisor, contractor, or owner-builder. A "journeyman" is defined as an experienced worker who is fully qualified (as opposed to a trainee, helper, laborer, assistant, apprentice, etc.) and is able to perform the trade without supervision, or a person who has completed an apprenticeship program. **Experience is documented on the Certification of Work Experience form** (see below).

CSLB may grant up to three years of credit toward the four-year requirement for completed education and/or apprenticeship programs. **Education/apprenticeship is documented in Section 6 of the application.** 

### **CERTIFICATION OF WORK EXPERIENCE FORM**

The Certification of Work Experience form must be completed by the qualifier and certified by a person who has **direct knowledge of the experience and time period listed**. The experience must be verifiable through payroll records or similar documents. **Corrections on the Certification forms must be initialed by the certifier.** Forms containing strikeouts or modifications that may compromise the validity of the work experience certification may not be accepted.

To assist the certifier in completing Part 2 of the Certification of Work Experience form, the Description of Classifications document is available through a link on the home page of CSLB's website. This document may be used as a reference only – the certifier should <u>not</u> copy directly from the document when listing the specific trade duties that the qualifier has performed or supervised in the classification for which he or she is applying.

The Certification of Work Experience form may not be required if the qualifier:

- has ever served as the qualifier on a license in the same classification for which he or she is applying; or
- has passed both the Law and Business Examination and the trade exam for the same classification within the last five (5) years.

### **RE-EXAMINATIONS**

If you are required to take an examination, subject to some limitations, you have 18 months after the approval of your application in which to achieve a passing grade on the exam. During that time period, you may take the exam an unlimited number of times. A \$60 fee is required each time you reschedule an exam. (See Business and Professions [B&P] Code Section 7074 for more detailed information on re-examinations.)

### TRANSLATOR FOR EXAMINATION

If you have difficulty understanding or reading the English language, CSLB may allow you to use a translator to read the examination for you. The translator you choose must be approved in advance by CSLB. If you would like to use a translator during your examination, please check the box near the bottom of Section 3 on page 1 of the application and information will be sent to you regarding the process.

### REASONABLE ACCOMMODATION - THE AMERICANS WITH DISABILITIES ACT

In compliance with the Americans with Disabilities Act (ADA), CSLB provides reasonable accommodation for applicants with disabilities that may affect their ability to take the required examinations. Applicants wishing to request reasonable accommodation pursuant to the ADA must complete the Special Accommodation Request for Examination form (available on the Forms and Applications page on CSLB's website) and submit it to CSLB with the appropriate supporting documentation. In order to make the necessary arrangements to accommodate candidate needs, the form and supporting documentation should be submitted as soon as possible.

#### **BUSINESS ENTITY**

Applicants must designate their business entity – sole owner, partnership, or corporation (joint ventures and limited liability companies must use a separate application). Applicants cannot change business entity after the application is submitted. Corporations must be registered with the California Secretary of State and in good standing prior to being issued a contractor license. The Secretary of State can be reached by calling (916) 653-6814 or by visiting their website at www.sos.ca.gov. Corporations must provide a current and active registration number on the application. All corporations must also provide the name(s) of their corporate officer(s): California corporations – president, secretary, and treasurer; foreign corporations – president only. Please be sure to write these titles in the space provided for the appropriate personnel in Sections 3 and 4 and be sure that they match those listed in the Secretary of State records.

## APPLICATION FOR ORIGINAL CONTRACTOR LICENSE General Information

Partnerships must list their Federal Employer Identification Number (FEIN), which is available from the U.S. Internal Revenue Service (IRS). The IRS can be reached by calling (800) 829-1040. Personal Social Security numbers are **not** acceptable for the FEIN.

### **EXAMINATION WAIVERS**

The examination is waived if the qualifying individual is currently, or has been in the last five years, actively engaged in the construction business and meets specific waiver requirements as mandated by law. (See B&P Code Sections 7065.1-7065.4.) In addition, the trade examination may be waived if the qualifier meets the requirements for reciprocity based on licensure in the same classification in Arizona, Nevada, and/or Utah (see CSLB's website for more information on reciprocity under the Applicants tab).

If you are applying for a waiver of the examination, you should complete the Application for Original Contractor License – Examination Waiver (7065).

### **LIMITED PARTNERS**

A Limited Partner is responsible for the business only in proportion to the amount of his or her financial interest; however, he or she does not participate in the daily operation of the business. If a member of the personnel is listed on the application as a Limited Partner, he or she cannot, in the future, be granted a waiver of the examination or a license continuance.

### **CONTRACTOR CLASSIFICATIONS**

Listed below are the contractor license classifications. For a complete description of the classifications, refer to the Description of Classifications document available through a link on the home page of CSLB's website.

General Engineering	A	Lock and Security Equipment	. C-28
General Building		Low Voltage Systems	
Boiler, Hot-Water Heating, and Steam Fitting		Masonry	
Building Moving/Demolition		Ornamental Metal	
Cabinet, Millwork, and Finish Carpentry	C-6	Painting and Decorating	. C-33
Ceramic and Mosaic Tile	C-54	Parking and Highway Improvement	
Concrete	C-8	Pipeline	
Construction Zone Traffic Control	C-31	Plumbing	
Drywall	C-9	Refrigeration	. C-38
Earthwork and Paving	C-12	Roofing	. C-39
Electrical	C-10	Sanitation System	
Elevator	C-11	Sheet Metal	. C-43
Fencing	C-13	Sign	. C-45
Fire Protection	C-16	Solar	. C-46
Flooring and Floor Covering	C-15	Steel, Reinforcing	. C-50
Framing and Rough Carpentry		Steel, Structural	. C-51
General Manufactured Housing		Swimming Pool	. C-53
Glazing		Warm-Air Heating, Ventilating, and Air-Conditioning	
Insulation and Acoustical		Water Conditioning	
Landscaping	C-27	Welding	. C-60
Lathing and Plastering		Well Drilling (Water)	
Limited Specialty (see below)		,	

The C-61 Limited Specialty classification is for contractors who specialize in work not listed above (for example, D-50 Suspended Ceilings) or who perform work that is a specialized part of an existing classification (for example, D-29 Paper Hanging). The Description of Classifications document contains a full listing of the subcategories of the C-61 classification.

### **BOND AND INSURANCE REQUIREMENTS**

Please refer to CSLB's website (including *Blueprint for Becoming a Licensed Contractor*) for information on the bond and insurance requirements for licensure. For more detailed information on bonds, refer to *A Guide to Contractor License Bonds*, which can be viewed on the Guides and Pamphlets page of CSLB's website.

## APPLICATION FOR ORIGINAL CONTRACTOR LICENSE General Information

### REISSUANCE OR REASSIGNMENT OF LICENSE NUMBER

If the qualifier has previously been licensed, it may be possible to have the previous license number reissued or reassigned under certain circumstances. (See B&P Code Section 7075.1 and Form 13A-1h.)

### **CONSTRUCTION MANAGEMENT EDUCATION ACCOUNT**

A grant program was established in 1991 to provide funds for qualified public post-secondary schools that teach construction management. Applicants may voluntarily contribute to the account when paying the application fee or the license renewal fee. If you would like to make a voluntary contribution, please mark the box on the top portion of page 1 of the application, write in the dollar amount in the space provided, and include that dollar amount in the total amount paid with your application, or submit a separate check or money order made payable to CSLB/Construction Management Education Account. (See B&P Code Section 7139, Article 8.5.)

### **COLLECTION OF SOCIAL SECURITY NUMBERS**

With the exception of the driver license numbers, all information requested on the application is mandatory, including disclosure of U.S. Social Security numbers (SSN). Collection of the SSN is authorized by B&P Code Section 30 and Public Law 94-455 (42 U.S.C.A. 405(c)(2)(C)). SSNs are used exclusively for the purpose of tax enforcement and/or compliance with any judgment or order for family support in accordance with Family Code Section 17520. If you fail to disclose your SSN, you will be reported to the Franchise Tax Board, and they may assess a \$100 penalty against you. The official responsible for the maintenance of this information is the Registrar of Contractors, Contractors State License Board. The information may be transferred to other state or government agencies. Individuals have the right to review files or records about them maintained by the agency, unless the records are identified as confidential information and exempted from the Information Practices Act, Civil Code Section 1798.3.

### **COLLECTION OF PERSONAL INFORMATION**

CSLB collects the personal information requested on the following forms as authorized by B&P Code Section 30 and California Code of Regulations (CCR) Section 816. CSLB uses this information to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing standards set by law and regulation. Submission of the requested information is mandatory. CSLB cannot consider your application for licensure or renewal unless you provide all of the requested information. You may review the records maintained by CSLB that contain your personal information, as permitted by the Information Practices Act. CSLB makes every effort to protect the personal information you provide us; however, it may be disclosed in response to a Public Records Act request as allowed by the Information Practices Act; to another government agency as required by state or federal law; or in response to a court or administrative order, a subpoena, or a search warrant. The application contains an applicant authorization for the Franchise Tax Board to disclose to CSLB any outstanding final liabilities for the purpose of administering B&P Code Section 7145.5. For more information on the Information Practices Act, visit the Office of Privacy Protection's website at www.privacy.ca.gov, or call (866) 785-9663.

### **RESOURCES ON THE LICENSING PROCESS**

CSLB has a variety of publications available to help you become a licensed contractor and to maintain your license. You can order free publications from CSLB's website (www.cslb.ca.gov), by writing to CSLB at the address listed below, or by calling the 24-hour automated phone system at (800) 321-CSLB (2752).

CSLB publications that can help you understand the licensing process include *Blueprint for Becoming a California Licensed Contractor*, *Description of Classifications*, *Building Your Career*, and *A Guide to Contractor License Bonds*. Please visit CSLB's website or call the toll-free phone number to find out how to order the current edition of the *California Contractors License Law & Reference Book*.

### **APPLICATION PROCESSING**

When CSLB receives your application, an acknowledgement letter will be sent to you that explains how to check the status of your application online at www.cslb.ca.gov or by calling (800) 321-CSLB (2752) using the Application Fee Number and Personal Identification Number (PIN) provided in the acknowledgement letter. After an application has been accepted by CSLB as being complete (also known as "posted"), a fingerprint package will be sent to the applicant, as required by law. Please include your Application Fee Number in any correspondence. All correspondence should be sent to:

Contractors State License Board 9821 Business Park Drive Sacramento, CA 95827-1703

Mailing Address: P.O. Box 26000, Sacramento, CA 95826-0026

STATE OF CALIFORNIA

9821 Business Park Drive, Sacramento, CA 95827
Mailing Address: P.O. Box 26000, Sacramento, CA 95826

Governor Edmund G. Brown Jr.

800-321-CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

### **Application for Original Contractor License**

		9					
App	Single election	<b>\$200</b>	The application fee for refundable once the application	•	classification (\$300) is no	ot	
	Single classification	).\$180.		or a pers de payab	onal, business, certified, le to the Registrar of		
	Voluntary contribution to Construction Management Education Account\$				or each dishonored chec	k.	
Please type or print neatly and legibly in black or dark blue ink.							
	ECTION 1 - BUSINESS NAM						
Bu	siness Name: The legal business name rate. The full business name must be provided	is the name th		nse and is	the actual name under wh	nich the contracting	g business will
Na or A	me Compatibility: The business name ABC123 Tile to apply for a C-10 Electrical con use or for ABC123 Tile to apply for a C-54 Ce ds "partners" or "corporation" in its business n	e must be comp tractor license, ramic and Mos	but it would be acceptab	le for AB0	C123 Construction to apply	for a B-General E	Building contractor
1. F	ULL NEW BUSINESS NAME				2. CLASSIFICATION RE be requested on the orig		
3a. I	BUSINESS MAILING ADDRESS Number/Street	or P.O. Box		City		State	ZIP Code
3b. I	BUSINESS STREET ADDRESS Number/Street	Only – <b>NO</b> P.O.	Boxes or PMBs	City		State	ZIP Code
3c. I	BUSINESS PHONE NUMBER	BUSINESS FA	AX NUMBER		BUSINESS EMAIL ADDRE	SS	
	( )	( )					
SF	ECTION 2 – BUSINESS ENT	ITY					
Co sure	rporation / Partnership: Corporation to write the corporate titles (president, secretar Federal Employer Identification Number (FE tion for more information.)	ns must provide tary, and treasu	urer) in the space provide	ed for the a	appropriate personnel in S	ections 3 and 4. P	artnerships must list
4. N	EW BUSINESS WILL OPERATE AS A (check o	nly one)					
	Sole Ownership Partnership – Fed	eral Employer	· ID #		California Corpora	ation #	
SE	ECTION 3 – QUALIFYING IN	IDIVIDUA	L FULL LEGAL	NAM	E AND ADDRES	S	-
Qu lega	alifying Individual (Qualifier): A of all names of all individuals. (See page 1 of the	qualifying indivi General Inforn	dual is required for every	classifica	ntion on every license issue	ed by CSLB. You r	nust provide <b>full</b>
5a. (	QUALIFIER'S FULL LEGAL NAME Last	First	Middle		DATE OF BIRTH	SOCIAL SEC	CURITY NUMBER
5b. I	RESIDENCE ADDRESS Number/Street Only – I	NO P.O. Boxes	or PMBs	City		State	ZIP Code
	UALIFIER'S EXISTING / PREVIOUS CSLB CENSE NUMBER(S) (If none, enter N/A)		E OF NEW BUSINESS HE QUALIFIER _%	DRIV	ER LICENSE NUMBER	RESIDENCE PHO	ONE NUMBER
	ITLE OR POSITION (check only one) Corporat Owner Qualifying Partner RME*	RMO/Corp	oorate Officer - Title(s) _				
* RI	MEs are prohibited from having an active sole	owner license.	. Please visit CSLB's web	osite for ar	n Application to Inactivate (	Contractor's Licen	se, if needed.



FOR CSLB USE ONLY

I certify under penalty of perjury under the laws of the State of California that all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate, and that I have reviewed the entire contents of this application. (The definition of "perjury" is telling a lie while under oath.) I authorize the Franchise Tax Board to provide CSLB with required tax information pursuant to B&P Code Section 7145.5.

#### SECTION 4 - PERSONNEL FULL LEGAL NAMES AND ADDRESSES (Other than Qualifying Individual) The following must be completed by all individuals who will be listed on the license. You must provide full legal names of all individuals. Each individual must sign the certification under penalty of perjury. (The definition of "perjury" is telling a lie while under oath.) 9a. PERSONNEL FULL LEGAL NAME Last DATE OF BIRTH SOCIAL SECURITY NUMBER Middle RESIDENCE ADDRESS Number/Street Only - NO P.O. Boxes or PMBs City State ZIP Code DRIVER LICENSE # RESIDENCE PHONE NUMBER TITLE OR POSITION (check only one) Owner General Partner Limited Partner Corporate Officer - Title(s) I certify under penalty of perjury under the laws of the State of California that all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate, and that I have reviewed the entire contents of this application. I authorize the Franchise Tax Board to provide CSLB with required tax information pursuant to B&P Code Section 7145.5. Printed Name Signature 9b. PERSONNEL FULL LEGAL NAME Last Middle DATE OF BIRTH SOCIAL SECURITY NUMBER RESIDENCE ADDRESS Number/Street Only - NO P.O. Boxes or PMBs City State ZIP Code **DRIVER LICENSE #** TITLE OR POSITION (check only one) RESIDENCE PHONE NUMBER General Partner Corporate Officer - Title(s) Limited Partner I certify under penalty of perjury under the laws of the State of California that all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate, and that I have reviewed the entire contents of this application. I authorize the Franchise Tax Board to provide CSLB with required tax information pursuant to B&P Code Section 7145.5. **Printed Name** 9c. PERSONNEL FULL LEGAL NAME Last Middle DATE OF BIRTH SOCIAL SECURITY NUMBER First RESIDENCE ADDRESS Number/Street Only - NO P.O. Boxes or PMBs City **ZIP** Code DRIVER LICENSE # State TITLE OR POSITION (check only one) RESIDENCE PHONE NUMBER General Partner Limited Partner Corporate Officer - Title(s) I certify under penalty of perjury under the laws of the State of California that all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate, and that I have reviewed the entire contents of this application. I authorize the Franchise Tax Board to provide CSLB with required tax information pursuant to B&P Code Section 7145.5. Date **Printed Name** 9d. PERSONNEL FULL LEGAL NAME Last SOCIAL SECURITY NUMBER DATE OF BIRTH Middle DRIVER LICENSE # RESIDENCE ADDRESS Number/Street Only - NO P.O. Boxes or PMBs City State ZIP Code TITLE OR POSITION (check only one) RESIDENCE PHONE NUMBER General Partner Limited Partner Corporate Officer - Title(s) I certify under penalty of perjury under the laws of the State of California that all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate, and that I have reviewed the entire contents of this application. I authorize the Franchise Tax Board to provide CSLB with required tax information pursuant to B&P Code Section 7145.5. Signature Printed Name FOR CSLB USE ONLY

(If additional space is needed, please make a copy of this blank page.)

### **SECTION 5** – REQUIRED APPLICATION QUESTIONS

All questions in this section must be answered. Questions 10, 11, and 12 pertain to all individuals listed on this application (qualifying individual and all personnel listed in Section 4). If you checked "Yes" in response to any question, the person involved must attach a separate sheet with a detailed explanation for each situation. 10. To the best of your knowledge, is anyone listed on this application (or any company the person is or was a part of, or any immediate family member of the applicant) named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against any bond or cash deposit pertaining to a construction project? (Immediate family member is defined by BPC §7075.1 as a spouse, father, mother, brother, sister, son, daughter, stepson, □ Yes □ No stepdaughter, grandson, granddaughter, son-in-law, or daughter-in-law.) If you checked "Yes" for this question, you are required to attach a statement identifying all judgments (pending or on record), liens, past due unpaid bills, claims, or suits and a detailed explanation of the situation. Include the names and addresses of the parties involved. If the obligation was or is being discharged in bankruptcy, attach a copy of the bankruptcy filing and a copy of the creditors list. 11. Has any individual listed on this application ever been convicted of or plead guilty or nolo contendere to ANY misdemeanor or felony in the United States or a foreign country? NOTE: Convictions that were later expunged from the records of the court or set aside pursuant to California Penal Code §1203.4, 1203.4a, or 1203.41 or an equivalent non-California law MUST be disclosed. However, some convictions should NOT be disclosed, including the following Convictions that were adjudicated in a juvenile court: Convictions under California Health and Safety Code §11357 (b), (c), (d), or (e) or §11360 (b) that are two years old or older; Under certain circumstances, some arrests/convictions relating to specified marijuana offenses that occurred prior to January 1, 1976, as provided in Health and Safety Code §11361.5 (b); and Under certain circumstances, some arrests/convictions relating to specified drug offenses as provided in Penal Code □ Yes □ No §1000. If you checked "Yes" for this question, you are required to attach a statement disclosing all pleas/convictions, including violated law sections, and thoroughly explain the acts or circumstances which resulted in the plea/conviction. In addition, the following information must be included for each plea/conviction: date of the plea/conviction, level of the plea/conviction (i.e., misdemeanor or felony), county and state where the violation took place, name of the court, court case number, sentence imposed, jail/prison term served, terms and conditions of parole or probation, parole or probation completion dates, and parole agent/probation officer names and phone numbers. You may submit the required information using the Disclosure Statement Regarding Criminal Plea/Conviction form that is available on the Forms and Applications page on CSLB's website. The information provided will be verified through CSLB's fingerprinting requirement. Failure to report a disclosable plea/conviction is considered falsification of your application and is grounds for denial of your application. 12. To the best of your knowledge, has anyone on this application (or any company the person was a part of, or any immediate family member of the applicant) ever received a citation from the Contractors State License Board or had a contractor license or other professional or vocational license or registration denied, suspended, or revoked by □ Yes □ No this state or elsewhere? (Check "No" if the license was suspended due to lack of a bond, workers' compensation insurance, a qualifying individual, or family support.) If you checked "Yes" for this guestion, you are required to attach a statement detailing the events leading to this action. 13. (This question must be answered by the qualifying individual.) The Registrar of Contractors has determined that direct supervision and control includes any one or a combination of the following activities: supervising construction, managing □ Yes □ No construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on construction job sites. Will you, as the qualifying individual, perform one or more of these duties? 14. (This question must be answered only if the qualifying individual is a Responsible Managing Employee [RME].) CCR §823 states that an RME must work at least 32 hours per week or 80% of the total operating hours per week for the entity for □ Yes □ No which he or she acts as the qualifier. Will you, as the Responsible Managing Employee, meet the requirement of CCR §823 cited above? 15. By law, all new businesses applying for a license must have more than \$2,500 operating capital. (BPC §7067.5) Operating □ Yes □ No capital is your current assets minus your current liabilities. Does your operating capital exceed \$2,500? SECTION 6 – QUALIFIER EDUCATION, APPRENTICESHIP, LICENSURE, AND MILITARY 16. HAVE YOU COMPLETED AN EDUCATIONAL OR APPRENTICESHIP PROGRAM? □ No If you checked "Yes," you may be granted credit for completed education in a business, technical, or construction-related field if you submit sealed official transcripts from your college/university. If you received your degree outside of the United States, your transcripts must be translated and evaluated by an accredited evaluation service that does business within the United States. For apprenticeship programs, you may be granted credit if you submit a copy of your apprenticeship certificate, **AND** enter the beginning and ending dates of your completed apprenticeship program: From to (The apprenticeship period cannot overlap the journey-level experience period being certified.) Month/Dav/Year Month/Day/Year RECIPROCITY - If you are seeking a waiver of the trade exam because you are licensed in one of the specified classifications in Arizona, Nevada, and/or Utah, please check this box. For more information, refer to page 3 of 4 in the General Information section MILITARY - If you are currently serving in the military (California National Guard or United States Armed Forces) or previously served,

FOR CSLB USE ONLY

please check this box. For information about the services that CSLB offers military personnel, their families, and veterans, including

expedited application processing and experience credit for military duties, refer to CSLB's website.



9821 Business Park Drive, Sacramento, CA 95827
Mailing Address: P.O. Box 26000, Sacramento, CA 95826
800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

# CERTIFICATION OF WORK EXPERIENCE General Information

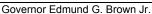
- This form must be filled in completely in order to document work experience or the application will be returned. The
  qualifying individual and certifier must type or print neatly and legibly in black or dark blue ink pencil is not acceptable.
- FORMS CONTAINING STRIKEOUTS OR MODIFICATIONS MAY BE REJECTED.
- Corrections on the Certification of Work Experience forms must be initialed by the certifier.
- Original signatures are required faxed, photocopied, or stamped signatures are not acceptable.
- All qualifying individuals and certifiers must be at least 18 years old.
- All Certification of Work Experience forms must be submitted with the application.
- The Certification of Work Experience form, when filed with an application, becomes the property of CSLB and is kept as a matter of record. Make a copy of the completed and signed form for your records you may be asked to provide further documentation or testimony to verify your experience.
- If, within the last five (5) years, you have passed an examination in the classification for which you are now applying, you may not need to complete this form. Such applicants should complete the Application for Original Contractor License Examination Waiver (7065). However, if you are applying for a waiver of the examination pursuant to B&P Code Sections 7065.1(b) or 7065.1(c), you do need to complete this form. (Please refer to Blueprint for Becoming a Licensed Contractor for more information on exam waivers.) NOTE: If your previous application was denied on the basis of a lack of qualifying work experience, you must complete this form, regardless of whether or not you passed the exam.
- Anyone who knowingly obtains or offers false or forged documents to be filed, registered, or recorded in any public office in California is guilty of a felony. (Penal Code Section 115)

### **PART 1 – QUALIFYING INDIVIDUAL INFORMATION**

• The qualifying individual must complete Part 1 in its entirety before the certifier completes Part 2.

#### PART 2 – WORK EXPERIENCE AND CERTIFICATION STATEMENT

- The certifier must complete Part 2 in its entirety after the qualifying individual has completed Part 1.
- The qualifying individual must document at least four (4) full years of journeyman-level or higher experience in the classification for which he or she is applying. The experience must have been obtained within the last 10 years.
- The qualifying individual's work experience must have been completed at the level of journeyman, foreman, supervisor, or contractor, or as an owner-builder or self-employed individual, as defined below:
  - A "journeyman" is an experienced worker who is fully qualified (as opposed to a trainee, helper, laborer, assistant, apprentice, etc.) and is able to perform the trade without supervision, or a person who has completed an apprenticeship program. (CCR Section 825)
  - A "foreman" or "supervisor" is a person who has the knowledge and skills of a journeyman and directly supervises construction projects.
  - A "contractor" is an individual who is currently a licensed California contractor, a former licensed California contractor, personnel of record on a California license, or an out-of-state licensed contractor. A contractor has the skills necessary to manage the daily activities of a construction business, including field supervision.
  - An "owner-builder" (a person who performs work <u>solely</u> on his or her own properties) or a "self-employed individual" must have the knowledge and skills of a journeyman as listed above and the skills necessary to manage the daily activities of a construction business, including field observation. Owner-builders must complete and submit the Construction Project Experience form.
- The Description of Classifications document may be used as a reference only and is available through a link on the home page of CSLB's website. You should not copy directly from the document when listing the specific trade duties the qualifying individual performed or supervised in the classification for which he or she is applying.
- The Certification Statement at the bottom of the form must be completed by a qualified, responsible person who is able to certify the work experience of the qualifier. The certifier can be an employer, fellow employee, journeyman, union representative, contractor, business associate, or a client if the applicant is/was self-employed. This form will help CSLB determine whether the qualifier has the experience necessary to become a capable, qualified contractor.
- The certifier must have direct knowledge of the qualifier's experience during the time period listed. "Direct knowledge" means personal knowledge of the experience that does not depend on outside information or hearsay. The certifier must be able to certify that the qualifier demonstrated a level of knowledge and skills expected of a journeyman or higher in the classification for which he or she is applying.
- Any licensee whose signature appears on a falsified Certification of Work Experience form, or who otherwise certifies
  false or misleading experience claims submitted by an applicant to obtain a contractor license, will be subject to
  disciplinary action. (B&P Code Section 7114.1)





9821 Business Park Drive, Sacramento, CA 95827
Mailing Address: P.O. Box 26000, Sacramento, CA 95826
800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

### **Certification of Work Experience**

Please read the General Information section on the previous page before beginning.

The qualifying individual must complete the information in Part 1; the individual certifying the experience (certifier) must complete Part 2. The experience must be verifiable through payroll records or similar documents. If additional space is needed to list the trade duties, please attach a separate sheet.

Use a separate form for each employer. If you need additional forms, please make a copy of this blank form or visit CSLB's website.

Please type or print neatly and legibly in black or dark blue ink.

FORMS CONTAINING STRIKEOUTS OR MODIFICATIONS MAY NOT BE ACCEPTED.

Corrections on the Certification of Work Experience forms must be initialed by the certifier.

PART 1 - QU	IALIFYING IN	<b>DIVIDUAL IN</b>	<b>VEORMATION</b>					
The qualifying	individual must	complete Par	t 1 in its entirety	<u>.</u>				
1. QUALIFIER'S FULL	LEGAL NAME Last		First		Mic	ldle		
			EMPLOYED, LEAVE TH	IS SPACE B	LANK AND	LICENSE NUMBER	OF EMPLOYER	
CHECK THIS BOX	☐ (If you checked the	box, skip lille 3 allu g	o to line 4 )					
3. EMPLOYER'S BUSI	NESS STREET ADDRI	ESS Number/Street (	Only – <b>NO</b> P.O. Boxes	City	•	State	ZIP Code	
					_DER (see previous page			
IF YOU CHECKED "	YES" ABOVE, USE TH	E ENCLOSED CONS	TRUCTION PROJECT I	EXPERIENC	E FORM TO PROVIDE A	LIST OF COMPLETED	PROJECTS.	
<b>DADT 2</b> _ \\/(	JDK EXDEDII		CERTIFICATIO	AT2 IAC	TEMENIT			
					individual has co	mploted Bort 1		
The Certifier inc	ist complete Pa	art 2 iii its eiitii	rety <u>after</u> the qua	aniying		OR A TOTAL OF		
5. APPLICANT'S	☐ FULL-TIME	1				JR A TOTAL OF		
JOURNEYMAN- LEVEL OR HIGHER		} FROM	то		_ =	YEAR(S) and	MONTH(S)	
TIME-BASE WORKED WAS	LITARY TIME			n/Day/Year	(Do not claim RIENCE only part-time	credit for full-time work		
(check one):					ICATION) for six (6) year			
6. IN THE SPACE BEL	OW, LIST ALL SPECIF	TIC TRADE DUTIES A	APPLICANT PERFORME	D OR SUP	ERVISED IN THE CLASSI	FICATION FOR WHICH	I HE/SHE IS	
APPLYING. <b>PLEASI</b>	E REFER TO THE DES	CRIPTION OF CLAS	SIFICATIONS DOCUM	ENT FOR A	SSISTANCE. (Do not list o	office work or individual	oroject names )	
<u> </u>								
My relationship to		Name of O	ualifying Individual (Applican	f)		is or was (check all	that apply):	
∏Fn	nployer □ Fe	llow Employee	□ Foreman or S		☐ Journeyman	☐ Business Associa	ate	
	epresentative	☐ Contractor (Lice		. цро. т.оо.	•	nt (if qualifier was self-er		
CERTIFIER'S STREET	•	,		City		State	ZIP Code	
		•						
PHONE NUMBER		FAX NUMBER	R		EMAIL ADDRESS			
( )		( )						
			me period outlined abo		under penalty of perjury, ι <i>h</i> )	under the laws of the Sta	ate of California, that	
7. Date	Signature	on the definition of p	ionary is terming a ne win		ited Name			

Note: For information on the collection of personal information, please refer to the General Information section at the beginning of this application package, under the heading "Collection of Personal Information."

FOR CSLB USE ONLY



Governor Edmund G. Brown Jr.



9821 Business Park Drive, Sacramento, CA 95827 Mailing Address: P.O. Box 26000, Sacramento, CA 95826 800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

### **Construction Project Experience**

This form must be completed <u>ONLY</u> if the qualifying individual indicates on the Certification of Work Experience form that he or she obtained experience working on his or her own property as an <u>owner-builder</u>, or as otherwise requested by CSLB.

Use a separate form for each project. If you need additional forms, please make a copy of this blank form or visit CSLB's website. Please type or print neatly and legibly in black or dark blue ink. Incomplete forms are not accepted.

1. QUALIFIER'S (OWNER-BUILDER) FULL LEGAL NAM	IE Last	First	Middle		PHONE NUMBER	
					( )	
2. PROJECT STREET ADDRESS Number/Street Only -	NO P.O. Boye	26	City		State	ZIP Code
2.1 NOSECT STREET ADDITECT Number/Street Only -	- <b>110</b> 1 .O. DOX		City		Otate	Zii Code
3. START DATE Month/Day/Year	COMPLETION	ON DATE Month/Day/Ye	205	TOTAL PRO	IFOT TIME	
3. START DATE MONTH/Day/Year	COMPLETION	ON DATE Month/Day/Ye	ear	TOTAL PRO	JECT TIME	
					YEARS and	MONTHS
4. TYPE OF PROJECT (For example: residential room a	iddition)					
5. TRADES PERFORMED (For example: framing, electr	ical)					
6. PROJECT SIZE (square feet, linear feet, or cubic yard	ds)					
Building	Other					
7. YOUR DUTIES AND WORK YOU PERFORMED (For		pared plans, obtained pe	rmits installed all sh	eetrock installe	d 4-ton HVAC unit)	
(1.00	oxampioi prop	aroa piario, obtairoa po		oou oon, motano	u : 10	
-						
8. YOUR POSITION LEVEL (For example: trainee, appr	entice. journev	man. supervisor)				
( o o o o o o o o o o o o o o o o o o o	, ,,	,,				
9. EXPLAIN HOW PAST EXPERIENCE, TRAINING, ANI		ION DDEDADED VOLL	EOD THE DOSITION		I STATED IN #9 ABON	/E
9. EXPERINTION PAST EXPENSEL, TRAINING, AND	DION LDOCAT	ION FREFARED TOO	OK THE POSITION	NAI IIIL LLVL	L STATED IN #0 ABOV	<i>,</i> _
-						
10. SCOPE OF WORK (For example: placed 600 sf of m	nix & sod, insta	lled 2500 sf of concrete	tile roof, poured 12 y	ds of concrete of	Irive, installed 20 linear	ft. of cabinetry)
11. NUMBER OF LABORERS AND THE TRADES THEY	PERFORME	)			-	
-						
12. NUMBER OF GENERAL CONTRACTORS OR SUBO	CONTRACTOR	OR AND THE TRADER T	HEN DEDENDMED			
12. NUMBER OF GENERAL CONTRACTORS OR SUB	JONTRACTOR	AS AND THE TRADES I	HET PERFORMED			
•						
13 COST OF MATERIALS OR TOTAL COST OF PROJE	FCT					

FOR CSLB USE ONLY