State of Arkansas
CONTRACTORS LICENSING BOARD

Residential Remodeler
New Application

$50.00 Filing Fee - NON-REFUNDABLE / NON-TRANSFERABLE

MAIL TO:

CONTRACTORS LICENSING BOARD
4100 RICHARDS ROAD
NORTH LITTLE ROCK, ARKANSAS 72117
Main Phone Number (501) 372-4661
Web Site: www.arkansas.gov/clb

PLEASE READ THE INSTRUCTIONS (pages 3 & 4)
BEFORE COMPLETING THE APPLICATION

RESIDENTIAL REMODELER NEW APPLICATION

TYPE OF LICENSE

You can apply for a Limited license or an Unlimited license.

With a **Limited license** you can **ONLY** do residential remodeler projects that are less than $50,000, including, but not limited to, labor and material.

With an **Unlimited license** you can do residential remodeler projects of any size.

Please ✓ the box for the license being applied for….

☐ **Limited License**

(Limited license means you can **ONLY** do residential remodeler projects that are less than $50,000 including, but not limited to, labor and material.
See page 3 for instructions)

☐ **Unlimited License**

(Unlimited license means you can do residential remodeler projects of any size.
See page 4 for instructions)

Limited
Residential Remodeler
Instructions/Checklist

The completed application must be in this office three (3) weeks prior to a committee meeting to be reviewed. For a list of meeting dates, check our website at www.arkansas.gov/clb. Once the application is received in our office, it must be complete by 90 days. After 90 days, another application and filing fee, etc. will be required.

If applying for **a Commercial or Residential Builders** contractor license: ***STOP HERE!!***

Download the Commercial New Application or the Residential Builders New Application and follow the instructions. The web address is:www.arkansas.gov/clb.

1. Complete the Application- Pages 2, 5, 9, 10 (if applicable), 11, and 12.

2. $50.00 filing fee made payable to the Contractors Licensing Board. (**NON-REFUNDABLE / NON-TRANSFERABLE**)

3. Three (3) references on forms provided (pages 6, 7, and 8). The references should not be from a supplier or banker unless they have observed your work and can describe it. **The references must show two (2) years appropriate experience in construction. The experience must justify the issuance of a Residential Remodeler's license. We cannot accept references that are signed over 90 days from submission.**

4. Proof of passing the Arkansas Business and Law test. Please refer to page 13 for more information about the test.

5. If applying as a Corporation, LLC, LP, or LLP, attach a copy of the Articles/Filings from the entity's Secretary of State's Office. If a fictitious name has been registered for this company, attach a copy of the fictitious name registration.

UNLIMITED
RESIDENTIAL REMODELER
Instructions/Checklist

The completed application must be in this office three (3) weeks prior to a committee meeting to be reviewed. For a list of meeting dates, check our website at www.arkansas.gov/clb. Once the application is received in our office, it must be complete by 90 days. After 90 days, another application and filing fee, etc. will be required.

If applying for **a Commercial or Residential Builders** contractor license: ***STOP HERE!!***
Download the Commercial New Application or the Residential Builders New Application and follow the instructions. The web address is: ww.arkansas.gov/clb

1. Complete the Application- Pages 2, 5, 9, 10 (if applicable), 11, and 12.

2. $50.00 filing fee made payable to the Contractors Licensing Board. (**NON-REFUNDABLE / NON-TRANSFERABLE**)

3. Three (3) references on forms provided (pages 6, 7, and 8). The references should not be from a supplier or banker unless they have observed your work and can describe it. **The references must show two (2) years appropriate experience in construction. The experience must justify the issuance of a Residential Remodeler's license. We cannot accept references that are signed over 90 days from submission.**

4. Proof of passing Arkansas Business and Law test. Please refer to page 13 for more information about the test.

5. **CURRENT** compiled balance sheet less than one (1) year old. **A blank balance sheet can be printed off at www.arkansas.gov/clb; Forms; Balance Sheet.** The balance sheet must be in the name of the applicant obtaining the license. Only Sole Proprietorships can submit a personal balance sheet, **excluding** your personal residence and any retirement accounts includes stocks and bonds and cash value of life insurance. **All balance sheet statements must show POSITIVE NET WORTH.** A Schedule L from your corporation tax return may also be used. (No other tax forms will be accepted other than the Schedule L). **DO NOT SEND INCOME STATEMENTS.**

6. If applying as a Corporation, LLC, LP, or LLP, attach a copy of the Articles/Filings from your entity's Secretary of State's Office. If a fictitious name has been registered for this company, attach a copy of the fictitious name registration.

7. **If the applicant has one or more employees:** You must have Worker's Compensation insurance coverage. Provide us with a current certificate of insurance verifying Worker's Compensation insurance coverage.

Do not write in this space - CLB OFFICAL USE ONLY

Filing Fee: $_____ ID#: _____

Type of License: ☐ **Limited** ☐ **Unlimited**

RESIDENTIAL REMODELER
New Application

PRINT NAME OF COMPANY OR NAME (IF APPLYING AS A SOLE PROPERIORSHIP) AS YOU WISH FOR IT TO APPEAR ON LICENSE. IF APPLYING AS A CORPORATION, LLC, OR LLP, IT MUST READ EXACTLY AS REGISTERED WITH THE SECRETARY OF STATE OFFICE. APPLICANTS MUST CONDUCT / CONTRACT BUSINESS UNDER THE EXACT NAME SHOWN UPON THE LICENSE.

ANSWER ALL OF THE FOLLOWING QUESTIONS

1. Indicate the type of entity seeking a license by **circling one of the choices below**:
   SOLE PROPRIETORSHIP CORPORATION LLC PARTNERSHIP LP LLP
2. List Corporation Name, LLC Name, Partnership Name, LP Name, LLP Name, or Sole Proprietorship Name as applying for License:
   _____
3. IF Applicable, list Fictitious Name / D/B/A Name: _____
4. List the Federal ID# / EIN _____
5. Mailing Address _____City _____
   State _____ Zip Code _____ County/Parish _____
6. Physical Address if different from above_____
   Company Phone _____ E-mail Address _____
7. Name and Phone # for person to Contact with any Questions regarding this application request:_____

Complete the following with information for the person that will take or has taken the Business & Law Exam

Name _____ Social Security # _____

How long has this individual been with this company? _____

Position held with this company, check one: _____ Sole Owner

_____ Full time W2 employee

_____ Officer, member, or partner of the company and is actively involved in the day-to-day operations

REFERENCE FORM

THIS SECTION TO BE COMPLETED BY ENTITY APPLYING FOR LICENSE...

Insert your company name and address below. Complete the following questions regarding projects that reflect the appropriate experience for the classification(s) requested.

We cannot accept forms that are signed over 90 days from the date received.

APPLICANT NAME & ADDRESS (as shown on application)

_____

_____

_____

1. Name of the individual or company whose experience is being verified:

_____

2. List specific project(s) this company or individual has completed. List the name of the project(s), location of the project(s), dollar amount of the project(s), square feet of the project(s), and exactly what type of work was performed on each project. (Additional pages or information may be submitted.)

_____

_____

_____

BELOW TO BE COMPLETED BY INDIVIDUAL VERIFING THE ABOVE EXPERIENCE

The below section must be completed, signed, and dated by the individual that has firsthand knowledge of the above listed project(s), not the person applying for the Arkansas Contractor's License.

We cannot accept forms that are signed over 90 days from the date received.
Send completed form back to contractor for submission.

3. Yes__No __ Are you related to or affiliated with the owners of the company or any of the employees?

If yes, you are not eligible to complete this form. STOP!!!

4. To your personal knowledge, how long has the company or individual been performing the type of work listed in this reference? _____

By signing this form, I swear or affirm under oath that the foregoing reference information including attachments is/are true and correct.

Name & Address of Person Giving This Reference: (Print)

_____ Signature: _____

_____ Date: _____

_____ Phone No. _____

REFERENCE FORM

THIS SECTION TO BE COMPLETED BY ENTITY APPLYING FOR LICENSE...

Insert your company name and address below. Complete the following questions regarding projects that reflect the appropriate experience for the classification(s) requested.

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APPLICANT NAME & ADDRESS (as shown on application)

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_____ Date: _____

_____ Phone No. _____

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APPLICANT NAME & ADDRESS (as shown on application)

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_____

_____

_____

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We cannot accept forms that are signed over 90 days from the date received.
Send completed form back to contractor for submission.

3. Yes__No __ Are you related to or affiliated with the owners of the company or any of the employees?

If yes, you are not eligible to complete this form. STOP!!!

4. To your personal knowledge, how long has the company or individual been performing the type of work listed in this reference? _____

By signing this form, I swear or affirm under oath that the foregoing reference information including attachments is/are true and correct.

Name & Address of Person Giving This Reference: (Print)

_____ Signature: _____

_____ Date: _____

_____ Phone No. _____

APPLICANT INFORMATION

Note: For the following questions 1-17, **You/Your means**, this organization, any officer, the qualifier of this company, you, or anyone who owns 10% or more of the entity.

Yes___ No___ 1. Have you ever had a contractor license or been associated with a contractor license in this state or any other state? (See definition of you above) **If yes, attach separately a list of those that apply.**

Yes___ No___ 2. Do you knowingly employ any individual(s), or hire workers as independent contractors, who do not have legal authority to work in the United States of America? (See definition of you above)

Yes___ No___ 3. Are you legally authorized to work in the United States of America? (See definition of you above)

Yes___ No___ 4. Do you understand that the failure to comply with the Federal law on the hiring, as employees or as subcontractors of workers without legal authority to work in the United States of America can lead to the revocation of the contractor license in the State of Arkansas? (See definition of you above)

Yes___ No___ 5. Does this applicant have one or more employees?

Yes___ No___ 6. Does the applicant have Workers Compensation Insurance?

Answering yes to any of the following questions WILL NOT AUTOMATICALLY DISQUALITY you for a contractor license.

Yes___ No___ 7. Have you, or any construction related entity in which you were an investor, partner, officer, ever failed to complete a project awarded to you? **If yes, attach separately a statement of circumstance, the name of the individual, other organization, and reason for failure.**

Yes___ No___ 8. Have you filed bankruptcy or were you a part of any other organization that has filed bankruptcy within the last ten (10) years? (See definition of you above) **If yes, attach a written explanation as to why bankruptcy had to be filed, along with a copy of the document prepared by your attorney listing the creditors that shows the amounts owed to each creditor and a copy of the bankruptcy discharge.**

Yes___ No___ 9. Have you ever pleaded guilty, no contest, nolo contendere, been convicted, found guilty, or been sentenced for any felony or misdemeanor, other than traffic violations? (See definition of you above) **If yes, complete the Criminal Background Information form (page 10) for each offense.**

Yes___ No___ 10. Are you required to register on the sex offender registry in this state or any other state? (See definition of you above) **If yes, please attach separately a written explanation as to what occurred and when this occurred.**

Yes___ No___ 11. Do you or any construction related entity in which you own 10% or more, have any outstanding liens, judgments, or pending litigation? (See definition of you above) **If yes, attach separately details and an explanation.**

Yes___ No___ 12. Have you ever had a license revoked or suspended, been penalized, or disciplined, by the Arkansas Contractors Licensing Board, the Arkansas Residential Committee, or any other state? (See definition of you above) **If yes, attach separately details and an explanation.**

****ONLY COMPLETE THE FOLLOWING QUESTIONS IF APPLYING AS A SOLE PROPRIETORSHIP****

Yes___ No___ 13. Are you on Active Duty in the United States Military?

Yes___ No___ 14. Is your spouse on Active Duty in the United States Military?

Yes___ No___ 15. Are you a former member of the United States Military who has NOT been dishonorably discharged?

Yes___ No___ 16. Is your spouse a former member of the United States Military who has NOT been dishonorably discharged?

Yes___ No___ 17. If you answered yes to questions 13, 14, 15, or 16, do you hold a **current state contractor license** (not registration) issued by another state? If yes, provide a copy of your **current contractor license** issued by another State. If yes, you do not have to take the Arkansas Business and Law exam and you do not have to submit reference forms (pages 6, 7 and 8 of this application) to obtain a license with same classification as you have in the other State.

Complete this form **ONLY** if yes was answered to question #9 on page 9……..

Criminal Background Information

State of Arkansas Contractors Licensing Board

IN CASES OF MULTIPLE OFFENSES, MAKE A COPY OF THIS FORM TO SHOW INFORMATION FOR EACH OFFENSE……

1. Offender's legal name: _____
2. Offender's SSN: _____
3. Offender's DOB: _____
4. The crime in question: _____
5. The date of the conviction: _____
6. The jurisdiction (State, County, and City): _____
7. The sentence: _____

_____

_____

8. If you were incarcerated, the date of your release: _____
9. If you were placed on probation or parole, the date of release from probation or parole: _____

_____

10. Has the offense been sealed by the Court, pardoned, or expunged? If so, which one?: _____

_____

11. Written explanation as to what occurred: _____

_____

_____

_____

Corporation, LLC Partnership, LP, LLP, or Sole Proprietorship Data

If applying as a Sole Proprietorship, list full name (w/ middle initial):

Individual _____SSN:_____

If you are applying as an individual/sole proprietor, you may qualify for an initial fee waiver under the Workforce Expansion Act of 2021. To see if you qualify visit our website at www.arkansas.gov/clb. Click on the Workforce Expansion Act of 2021 link to see the list of waiver requirements and waiver form. If you do qualify, please complete the form and return it with your completed application packet.

Date the Company registered with the Arkansas Secretary of State's office (501-682-3409):_____

Please list full name (w/ middle initial) of the following:

President _____ SSN _____

Vice-President_____ SSN _____

Secretary _____ SSN _____

Treasurer _____ SSN _____

FOR ALL:

List anyone who owns 10% or more interest in the entity requesting a license.

- If an individual, please print the full legal name and their SSN.
- If a corporation or LLC, please list the legal company/LLC name and the Federal ID#.

Name_____ SSN_____
Name_____ SSN _____
Name_____ SSN _____
Name_____ SSN _____
Name_____ SSN _____
Name_____ SSN_____
Name_____ SSN _____
Name_____ SSN _____
Name_____ SSN _____
Name_____ SSN _____

AFFIDAVIT FOR COMPANY

(Corporation, LLC, Partnership, LP, LLP, Sole Proprietorship)

I, _____, being duly sworn/affirmed, state under oath:
(Name of Owner/Officer/Member/Partner/Sole Proprietor)

That I am _____ of _____;
(Position held) (Company Name, If Applicable)

Further, that the foregoing statement of experience and all statements contained within this application, including attachments are true and correct; Further, that I am familiar with the books and records of the above mentioned company showing its financial condition; that the financial statement(s) and any accompanying financial data attached hereto (or submitted separately) are taken from the books and records of said company and form a true and accurate statement of the financial condition of said company as of the date shown; Further, that the foregoing statements of experience and financial condition are submitted to the Contractors Licensing Board or the Residential Contractors Committee for the express purpose of inducing the Board or Committee to license the applicant as a contractor in the State of Arkansas, and that any depository, vendor or state agency is hereby authorized to supply such Board or Committee with any information necessary to verify these statements. Further, that with respect to any residential contract work in the State of Arkansas in the amount of $2,000.00 or more, including but not limited to labor and materials, the applicant is not now a party on any contract for such work, does not have any outstanding work or any bid for such work, will not bid, contract or perform any such work until such time as the applicant is approved and a license has been issued. Any exceptions to this affidavit are attached hereto. Any agency of the State of Arkansas is authorized to release to the Contractors Licensing Board, or its representative, or the Residential Contractors Committee, or its representative, any information necessary to show proper compliance with A.C.A § 17-25-101 et seq., or A.C.A. § 17-25-501 et seq., including the obtaining and reviewing of a criminal background check.

_____
(Signature of Owner/Officer/Member/Partner/Sole Proprietor)

Arkansas Business & Law Test
(Instructions)

The test is given by an independent testing company (P.S.I). If **you have questions about the test or need more information beyond what is furnished here, please call P.S.I at 1-855-257-1620.**

Examination Fee: **$84.00 (*Examination fees are not refundable or transferable)***

Schedule the following: ARKANSAS CONTRACTOR BUSINESS AND LAW EXAM
Payment methods: VISA, Mastercard, American Express or Discover
Registering Online: test-takers.psiexams.com/arconst (see instructions below)

Follow these instructions to register online:

1. Go to the above website.
2. Click on Tests.
3. You will be asked to select the examination.

a. Select the following: *AR Business and Law Examination (Onsite - Test Center)*
b. Click on Login/Register.
c. Click on Create Account if you need to register, otherwise sign in if you are already registered.
d. After registering, click on Login.
e. Click on Continue Booking.
f. Enter all required information and click NEXT.
g. Enter information to find your nearest test center and click Find.
h. Click on the testing facility you wish to test at.
i. Click Date & time you wish to test and click NEXT.
j. Enter payment information and click continue.

*** Make sure when registering you use the EXACT information you will have on your photo ID the day of taking your test! ***

4. Testing is held Monday–Saturday at most sites. Hours are determined at each site.
5. The test is open book, multiple choice, and 50 questions, with a 2-hour time limit.
6. You can order the book online at https://store.nascla.org (preferred method) or by calling the publisher directly at (623-587-9354).
7. Order the following: Arkansas Contractors Guide to Business Law and Project Management.
8. You may highlight, underline, annotate, and/or tab with permanent tabs prior to the exam session. However, reference material may not be written in during the exam session.
9. Permanent tabs are permitted.
   (Permanent tabs are defined as tabs that would tear the page if removed.)
10. Temporary tabs are NOT permitted.
    (Temporary tabs are defined as post-it notes or other tabs that may be removed without tearing the page.)
11. Applicants with disabilities or those who would otherwise have difficulty taking the examination should request alternative arrangements by calling P.S.I. at 1-855-257-1620.
12. On the day of your examination, you must arrive at the P.S.I. Center 30 minutes before your scheduled appointment to complete the admission procedures required before your test begins. You must bring the following with you: One official government-issued photo identification such as a driver's license, passport, etc., and your Contractors Guide to Business, Law and Project Management, Arkansas Edition.

PLEASE BE ADVISED:

a) You will only be tested from the Contractors Guide to Business, Law and Project Management, Arkansas Edition.
b) Verify your exam before you take the test to make sure it is the *AR Business and Law Examination (Onsite -Test Center)*.
c) P.S.I. will give you your results immediately. You can also have P.S.I. send the results directly to you. It is your responsibility to get the passing test to our office with the new application. If you request your results be sent to our offices, it could take several weeks to get to us, which could postpone the approval and release of your license.

To Register by Phone call: P.S.I at 1-855-257-1620.