Arkansas Fire Protection Licensing Board
Arkansas Department of Labor & Licensing

900 West Capitol, Suite 400, Little Rock, AR 72201
501-661-7903 (O) * Katherine.Dunford@arkansas.gov

AFPLB Admin Use Only	Date_____	Check #_____	Amount $_____
	Licensing Year_____		Processed By_____

REQUEST FORM
DUPLICATE LICENSE

Select All That Apply

☐Firm – Portable/Fixed $25
☐Firm – Sprinkler $25
☐Individual – Portable/Fixed $25
☐Individual – Sprinkler $25
☐Branch – Portable/Fixed $25
☐Branch – Sprinkler $25

Total Fee: $_____

Make all checks or money orders payable to:
Arkansas Fire Protection Licensing Board

DIRECTIONS: Enter the information for the license being duplicated below.

FIRM/BRANCH

AFPLB License #(s)

Name of Firm/Branch: _____ _____
Physical Address_____ _____
City: _____ State: _____ Zip: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Telephone:(____)_____ Fax:(___)_____ Email:_____
Owner/Manager Name:_____
Signature of Owner/Manager:_____ Date:_____

INDIVIDUAL

AFPLB License #(s)

Name: _____ _____
Last ***First*** ***MI*** _____
Home Address:_____
City: _____ State: _____ Zip: _____
Telephone:(___)_____Cell Number:(___)_____
Driver's License #:_____ State:_____

Revised 2/11/2026