

Subcontractor Registration **Commercial**



State of Arkansas **Contractors Licensing Board**

\$100.00 Filing Fee – Check or Money order only
NON-REFUNDABLE / NON-TRANSFERABLE

MAIL TO:

CONTRACTORS LICENSING BOARD
4100 RICHARDS ROAD
NORTH LITTLE ROCK, ARKANSAS 72117
Main Phone Number (501) 372-4661
FAX Number (501) 372-2247
Web Site: www.arkansas.gov/clb

Commercial Subcontractor Registration

IMPORTANT INFORMATION ABOUT SUBCONTRACTOR REGISTRATION:

1. A Registered Contractor is **NOT a licensed contractor**. It is a violation of the law for a Registered Contractor to perform a project for which a license is required.
2. A Registered Contractor may work as a SUBCONTRACTOR to a properly LICENSED contractor.
3. A Registered Contractor may not perform work as a Prime Contractor on a project for which a license is required.
4. A Registered Contractor will have to renew their registration yearly.

Subcontractor Registration Instructions / Checklist

- A **completed** application must be received, with the appropriate fee (all fees are non-refundable) before it can be considered.
- Once the application is received in our office, it must be completed within **90 days**.
- After 90 days, another application and filing fee will be required.

1. \$100.00 filing fee made payable to the Contractors Licensing Board. (**Fees are NON-REFUNDABLE / NON-TRANSFERABLE**)
2. Complete Application-Pages 4, 7, 8, and 9 (if applicable).
3. Complete pages 5 and 6 by circling the classification(s) for which the contractor is registering.
**Note that by completing the Affidavit (page 8) the applicant is certifying that they have the proper education, experience, training, skills and financial ability to perform the type of work for which it is registering.

If the contractor is registering for a classification which requires an Arkansas trade license, registration, or certificate, a copy of that trade license, registration, or certification must be submitted.

4. Fully executed \$10,000.00 Contractor's Bond that must be in Principal Name & EIN, as registered with the IRS. Please refer to pages 10 & 11 for more information about the bond.
5. **If the applicant has one or more employees:** You must have Worker's Compensation insurance coverage.
6. Remit documentation from your entity's Secretary of State's office showing that the Corporation, LLC, Partnership, LP, or LLP is in good standing with said Secretary of State.

CLB OFFICAL USE ONLY – (Do not write in this space)

Filing Fee: \$ _____ ID#: _____

Subcontractor Registration Application

PRINT NAME OF COMPANY OR NAME (IF APPLYING AS A SOLE PROPERIORSHIP) AS YOU WISH FOR IT TO APPEAR ON THE REGISTRATION. 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 REGISTRATION.

ANSWER ALL OF THE FOLLOWING QUESTIONS:

Indicate the type of entity seeking a registration by circling one of the choices below:

SOLE PROPRIETORSHIP CORPORATION LLC PARTNERSHIP LP LLP

Corporation Name, LLC Name, Partnership Name, LP Name, LLP Name as listed with Secretary of State's office / Sole Proprietorship:

Fictitious Name / D/B/A Name: _____
(If Applicable & as listed with Secretary of State's office)

Federal ID# / EIN _____

Mailing Address _____ City _____

State _____ Zip Code _____ County/Parish _____

Company Phone _____ Fax _____

Company E-mail _____

Information on person to contact with any questions regarding this application:

Name: _____

Phone#: _____

Email Address: _____

CLASSIFICATIONS

Please circle the specialty classification(s) being requested.

By circling a classification, the applicant certifies that it has the proper education, experience, training, skills and financial ability to perform the type of work for which it is registering.

Classification(s) marked with ** require an Arkansas Trade License or Certification.

- | | |
|--|--|
| <p>Above Ground Tanks</p> <p>** <u>Asbestos</u></p> <p>Awnings, Canopies & Gutters</p> <p>Base & Paving</p> <ul style="list-style-type: none">a. Base Constructionb. Hot & Cold Mixesc. Surface Treatmentd. Asphalte. Concrete Paving <p>Blinds, Curtains, Draperies, Theatrical</p> <p>Boat Docks</p> <p>** <u>Boiler Construction & Repair</u></p> <p>Bulk Storage Facilities</p> <p>Cable Television Lines (Above & Below Ground)</p> <p>Car Washes</p> <p>Carpentry, Framing, Millwork, Cabinets</p> <p>Ceilings, Wall Systems, Acoustical Treatments</p> <p>Chemical Resistant Tile & Brick</p> <p>Chimneys, Fireplaces</p> <p>Cofferdams, Dikes, Levees, Canals</p> <p>Communication, Computer or Sound Systems, Cabling</p> <p>Concrete</p> <p>Control Systems & Instrumentation</p> <p>Conveyors, Material Handling Systems, Cranes, Hoists</p> <p>Cooling Towers</p> <p>Demolition, Blasting</p> <p>Dredging</p> <p>Drywall</p> <p>** <u>Electrical</u></p> <p>Electrical Transmission Lines</p> <p>** <u>Elevators, Escalators, Dumbwaiters, Chairlifts</u></p> <p>Energy & Chemical Pipelines</p> <p>Energy Management, Retrofit Systems</p> <p>Environmental General</p> <p>Erosion Control</p> <p>** <u>Factory Trained Medical Equipment Technician</u>
("exemption" from Electrical Board required)</p> <p>Fencing, Gates</p> <p>Fiberglass</p> <p>Fireproofing</p> <p>Floors, Floor Covering</p> <p>Foundation Construction or Drilling, Pile Driving, Stabilization</p> <p>Furnaces, Fuel Burning or Heat Transfer Equipment,
Stokers, Refractories</p> <p>Furniture, Recreational and/or Playground Equipment,
Bleachers, Seating, Partitions</p> <p>** <u>Gas Fitter</u></p> <p>Generators, Turbines</p> <p>Glass, Glazing, Doors, Windows, Hardware, Storefront</p> <p>Golf Cart & Foot Bridges & Paths</p> <p>Golf Courses</p> <p>Grading & Drainage (Includes Pipe & Structures, Culverts,
Clearing, Grubbing & Rip Rap, Excavation)</p> | <p>Grain Bins</p> <p>Greenhouses</p> <p>** <u>Heating, Ventilation, Air Conditioning, Refrigeration</u></p> <p>HRA Miscellaneous & Specialty Items</p> <ul style="list-style-type: none">a. Traffic Safety<ul style="list-style-type: none">1. Pavement Markers2. Signaling3. Guardrails & Fencing4. Attenuators, Signalization & Roadway Lightingb. Landscaping<ul style="list-style-type: none">1. Seeding2. Sodding3. Planting4. Chemical weed & brush controlc. Pavement Rehabilitation<ul style="list-style-type: none">1. Pressure grouting2. Grinding & grooving<ul style="list-style-type: none">3. Concrete joints4. Underdrainsd. Miscellaneous Concrete<ul style="list-style-type: none">1. Sidewalks2. Driveways3. Curb & gutter4. Box culverts <p>Hydraulics</p> <p>Incinerator & Stack Construction</p> <p>Indoor/Outdoor Advertising</p> <p>Institutional & Kitchen Equipment</p> <p>Insulation</p> <p>Interior Work</p> <p>Kilns, Drying Systems</p> <p>Landfills</p> <p>Landscaping, Irrigation, Lawn Sprinkler Systems, Streams</p> <p>** <u>Landscaping with Planting</u></p> <p>Lathe, Plaster, Stucco, Dryvit, EIFS</p> <p>** <u>Lead Abatement</u></p> <p>Lift Stations, Pumps</p> <p>Lightning Protection</p> <p>Liners</p> <p>Marine Docks</p> <p>Masonry</p> <p>Mausoleums</p> <p>Medical Shielded Enclosures</p> <p>Metal Buildings, Detached Structures, Storage Buildings</p> <p>Metal Studs, Walls</p> <p>Meter Installation & Service</p> <p>Microwave Systems, Towers, Satellite Dishes</p> <p>Millwright</p> <p>Oil & Gas Field Construction, Rigging</p> <p>Overhead Doors & Dock Equipment</p> <p>Paint Booths</p> <p>Painting, Wallcovering</p> <p>Passenger Boarding Bridges</p> |
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Corporation, LLC, Partnership, LP, LLP, or Sole Proprietorship Data

Sole Proprietorship Data:

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

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.

If a Corporation:

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

President _____	SSN _____
Vice-President _____	SSN _____
Secretary _____	SSN _____
Treasurer _____	SSN _____

ALL....

List **ANYONE** who owns 10% or more interest in the entity requesting a registration.

- **If the ANYONE is an individual**, please print full name (w/middle initial) and Social Security number.
- **If the ANYONE is a Corporation or LLC**, please list the Federal ID number.

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

Name _____ SSN / EIN _____

APPLICANT INFORMATION

Note: For the purpose of the following questions 1-4, 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. Does this applicant have one or more employees?

Yes___ No___ 2. Does the applicant have Workers Compensation Insurance?

Answering yes to any of the following questions will not automatically disqualify you for a subcontractor registration.

Yes___ No___ 3. 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 9) for each offense.**

Yes___ No___ 4. 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.**

AFFIDAVIT

(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)

- All statements contained within this registration application, including attachments are true and correct.
- Any agency of the State of Arkansas is authorized to release to the Contractors Licensing Board, 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.
- Understand that a Registered Contractor is NOT a LICENSED CONTRACTOR.

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

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. The crime in question: _____
4. The date of the conviction: _____
5. The jurisdiction (State, County, and City): _____
6. The sentence: _____

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

9. Has the offense been sealed by the Court, pardoned, or expunged? If yes, which one? _____

10. Written explanation as to what occurred: _____

Instructions for Arkansas' **\$10,000 SURETY Bond**

**** All Unrestricted or Restricted Commercial Contractors are required to have this bond filed with the Board to have a valid license. ****

AGENTS: (Bond must have Contractors - Company Name and its EIN)

Only this prescribed form will be accepted. (Any alterations must have prior approval from the Contractors Licensing Board)

Only an Arkansas Resident or an Arkansas Non-Resident agency, agent, broker or producer that is currently licensed by the Arkansas Insurance Department can execute this surety bond.

IF issued by Direct Underwriter:

The bond may be executed solely by the Surety company. **An underwriter (employee) that works directly for the Surety need only sign the bottom left line and indicate that you're a direct underwriter.**

Continuation Certificates are not required, as our bonds are continuous until cancelled.

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**CONTRACTORS:**

**Principal Company Name** and **EIN** must appear on the bond, **exactly** as registered with the **IRS**. This name is how all work and bids are to be performed in Arkansas. (Any other name could constitute a possible violation)

See that the bond is filed with the Board as directed at the bottom of the bond form, for processing. A license is not valid without this bond in place with the Board.

**Any change in the Federal ID# requires a new bond be executed.** Any change in company name will require other documentation, **\*\*please call for instructions first.**

For questions regarding this bond, contact our office at 501-372-4661 or via email at [contractors.licensing.board@arkansas.gov](mailto:contractors.licensing.board@arkansas.gov)



## **\$10,000 Surety Bond** (Required by A.C.A. § 17-25-401)

Only an Arkansas Resident or an Arkansas Non-Resident insurance agency, agent, broker, producer, or surety (as a direct underwriter) that is currently licensed by the Arkansas Insurance Department can execute this surety bond.

**Effective Date** \_\_\_\_\_

**Bond Number** \_\_\_\_\_

### **STATE OF ARKANSAS**

WHEREAS, under the terms of A.C.A. § 17-25-401, et. seq., every contractor described therein must file with the Contractors Licensing Board a corporate surety bond or cash bond to secure compliance with A.C.A § 17-25-401, et. seq.

WHEREAS, every such contractor is required to comply with all the terms of said Code, and all rules and regulations promulgated by the Contractors Licensing Board pursuant to the authority of said Code, in the performance of contracts in the State of Arkansas:

NOW, therefore, we, the undersigned, as Principal and Surety (below), are held firmly bound to the State of Arkansas in the Sum of Ten Thousand Dollars (\$10,000) for payment of which we bind ourselves, our heirs, assigns, executors and administrators, jointly and severally, conditioned that if the undersigned principal shall promptly pay any amount of money due as provided in A.C.A. § 17-25-401, et. seq., then this obligation shall be null and void; otherwise, it shall be in full force and effect.

The Surety reserves, however, the right to cancel the above bond on the giving of sixty (60) days written notice to the Principal and to the State of Arkansas (Contractors Licensing Board).

**Principal's Company Name and EIN (as filed with the IRS)** \_\_\_\_\_ **Business Address & Phone#** \_\_\_\_\_

**Surety's Name,** \_\_\_\_\_ **Address, and Phone#** \_\_\_\_\_

Agents: \*\* Arkansas Insurance License must be attached \*\*

Insurance Company Name or Agent (Exactly as it appears on the AR Insurance License) \_\_\_\_\_

Mailing Address & Phone# \_\_\_\_\_

\*\*Signature of Agent/Broker/Producer\*\* \_\_\_\_\_ Printed Name \_\_\_\_\_

Power of Attorney Signature (if different than above) or IF Direct Underwriter - Surety Employee Signature ☐

**Contractor:** Mail, email: [contractors.licensing.board@arkansas.gov](mailto:contractors.licensing.board@arkansas.gov) or fax (501-372-2247) bond to the Board for processing: Contractors Licensing Board or ACLB, 4100 Richards Road, North Little Rock, AR, 72117

# CHECKLIST OF HELPFUL NUMBERS

## FOR CONTRACTORS PLANNING TO OPERATE IN THE STATE OF ARKANSAS

THE FOLLOWING IS A LIST OF REGULATORY AGENCIES TO WHICH YOU COULD BE RESPONSIBLE  
WHILE DOING BUSINESS IN THE STATE OF ARKANSAS.

|                                                                                |                                  |                                                                            |
|--------------------------------------------------------------------------------|----------------------------------|----------------------------------------------------------------------------|
| <b>CONTRACTORS LICENSE</b>                                                     | (501) 372-4661                   | <a href="http://www.arkansas.gov/clb">www.arkansas.gov/clb</a>             |
| <b>ONLINE DIRECTORY</b>                                                        | (501) 682-3000                   | <a href="http://www.arkansas.gov/directory">www.arkansas.gov/directory</a> |
| <b>CORPORATE FRANCHISE TAX</b>                                                 | Secretary of State               | (501) 682-3409                                                             |
| <b>INDIVIDUAL INCOME TAX</b>                                                   | (501) 682-1100                   |                                                                            |
| <b>CORPORATE INCOME TAX</b>                                                    | (501) 682-4775                   |                                                                            |
| <b>SALES &amp; USE TAXES</b>                                                   | (501) 682-7104                   |                                                                            |
| <b>UNEMPLOYMENT COMPENSATION</b>                                               | (501) 682-2121 or (855) 225-4440 |                                                                            |
| <b>WORKERS COMPENSATION</b>                                                    | (501) 682-3930 or (800) 250-2511 |                                                                            |
| <b>LABOR STANDARDS</b>                                                         | (501) 682-4505                   |                                                                            |
| <b>**ASBESTOS</b>                                                              | (501) 682-0744                   | <a href="http://www.adeq.state.ar.us">www.adeq.state.ar.us</a>             |
| <b>**BOILER CONSTRUCTION &amp; REPAIR</b>                                      | (501) 682-4553                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**ELECTRICAL</b>                                                            | (501) 682-4548                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**ELEVATORS, ESCALATORS,<br/>DUMBWAITERS, CHAIRLIFTS</b>                    | (501) 682-4538                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**GAS FITTER</b>                                                            | (501) 661-2642                   | <a href="http://www.healthy.arkansas.gov">www.healthy.arkansas.gov</a>     |
| <b>**HVACR</b>                                                                 | (501) 683-5475                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**LANDSCAPING w/PLANTING</b>                                                | (501) 225-1598                   | <a href="http://www.aad.arkansas.gov">www.aad.arkansas.gov</a>             |
| <b>**LEAD ABATEMENT</b>                                                        | (501) 671-1472                   | <a href="http://www.healthy.arkansas.gov">www.healthy.arkansas.gov</a>     |
| <b>**PLUMBING</b>                                                              | (501) 661-2642                   | <a href="http://www.healthy.arkansas.gov">www.healthy.arkansas.gov</a>     |
| <b>**REFRIGERATION, COLD STORAGE</b>                                           | (501) 682-9201                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**SEPTIC TANK INSTALLATION &amp; REPAIR</b>                                 | (870) 648-5446                   |                                                                            |
| <b>**SHEET METAL, DUCTS, VENTILATION</b>                                       | (501) 682-9201                   | <a href="http://www.labor.arkansas.gov">www.labor.arkansas.gov</a>         |
| <b>**SIGNAL or BURGLAR ALARMS,<br/>FIRE DETECTION &amp; MONITORING SYSTEMS</b> | (501) 618-8600                   | <a href="http://www.asp.arkansas.gov">www.asp.arkansas.gov</a>             |
| <b>**SPRINKLERS, FIRE PROTECTION</b>                                           | (501) 661-7903                   | <a href="http://www.arfireprotection.org">www.arfireprotection.org</a>     |
| <b>**UNDERGROUND STORAGE TANKS</b>                                             | (501) 682-0993                   | <a href="http://www.adeq.state.ar.us">www.adeq.state.ar.us</a>             |
| <b>**WATER WELLS</b>                                                           | (501) 682-3900                   | <a href="http://www.awwcc.arkansas.gov">www.awwcc.arkansas.gov</a>         |

**PLEASE NOTE:** This list may not include all the State Regulatory Offices, which you might need to contact. You should contact your accountant or attorney as to any other agencies which you may need to contact due to the special nature of your business.

**\*\*Requires proof of appropriate certification/licensure before the Contractors Licensing Board will approve the classification(s). Performing any of the following type projects without the appropriate certificate/license from the agency in question may be in violation of that agency's law. Performing any of these type projects without the specific classification from the Contractors Licensing Board may be in violation of the Contractors Licensing law.**