TO CHANGE OR ADD A QUALIFIER FOR YOUR COMPANY

*** Our office is to be notified in writing within 15 business days of the “qualifiers” departure with the licensed entity. Email notice to Jodie.hatfield@arkansas.gov***

Submit the following to our office:

1. A letter on company letterhead with the following: Request to remove and/or add another qualifier

2. Qualifying party form filled out and notarized. (attached) Notary cannot be over 90 days old and must include notary stamp.

3. Updated list of officers & their positions, members, and owners form (attached)

4. One of the following:
   a. Arkansas Business and Law Exam passing test score.
   b. Completed reciprocal form if applicable (under forms on our website)
   c. Arkansas Master Trade license (if applicable – ie: electrical, plumbing, HVAC)

** All forms and letters MUST be signed by a current owner, member, or officer of the company from #3 on this list.

When completed - the above required information can be sent via the following: emailed to Jodie Hatfield at jodie.hatfield@arkansas.gov or mail it to:

Arkansas Contractors Licensing Board
4100 Richards Road
North Little Rock, AR 72117

Please contact Jodie via email or by calling 501-371-1520 for more information.
ID# ________________

QUALIFYING PARTY: __________________________________ , SS#________________
(person taking test or trade license holder)

I, ___________________________ being duly sworn, do hereby certify that the above name
(Owner, Member, or Officer of Company) listed as a qualifying party is:

1. Employment Status of Qualifying party (check (✓) one of the following)
   _____ Full time paid employee (with W-2 income)
   _____ Owner, Member, or Officer of the company (actively involved in the day to day
   operations)

2. Answer the following questions pertaining to the qualifying party by checking yes or no

   Yes____ No_____ Has the above listed qualifier filed bankruptcy or were a part of any other
   organization that filed bankruptcy within the last ten (10) years? 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_____ Has the above listed qualifier ever been convicted of a felony? If yes,
   you will need to fill out the criminal history form. (attached)
   One form for each offense.

   Yes____ No_____ Does the above listed qualifier required to register on the sex offender registry in
   this state or any other state? If yes, you will need to fill out the criminal
   history form. (attached) One form for each offense.

   Yes____ No_____ Does the above listed qualifier have any outstanding liens, judgments, or pending
   litigation? If yes, attach separately details and a written explanation.

and do further understand and agree should this person's employment terminate, the licensed
entity would notify the Contractors Licensing Board in writing within fifteen (15) business days
and have another party qualified within thirty (30) days. If proper documentation is not received in
our office within thirty (30) days from termination date of employment, the license shall become invalid,
unless a written request for more time to requalify is received in this office.

Company Name: ______________________________________

Signature: ___________________________ Date: ______________
(Owner, Member or Officer)

Contact Phone Number: ________________________________
ID# _____________________

Company Name/Individual Name as licensed:
_____________________________________________________________________________________________________________________

Updated list of Owners/partners/Members involved in the day to day operations

Name: (First MI Last)                         Social Security Number:
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________

Updated list of Officers & their titles:  
Ex: President, Vice President, Secretary, Treasurer, CEO, CFO, Member

Name: (First MI Last)                     Title:                         Social Security Number:
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________________________________

Page 3                          Revised 06/2022
Complete this form ONLY if you answered yes to question # 2 on page 2 regarding felonies or sex offender

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: ___________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

______________________________________________________________________________________
______________________________________________________________________________________
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 them at 855-257-1620.

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

Registration Instructions:

By Phone: P.S.I. at 1-855-257-1620  
Payment methods: VISA, Mastercard, American Express or Discover  
Schedule the following: Arkansas Contractor Business and Law Exam

Registering Online:  
https://test-takers.psiexams.com/arconst

Follow these instructions:

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 registered, click on Login.
   **Make sure when registering you use the EXACT information you will have on your photo ID the day of taking your test.
   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
3. Testing is held Monday - Saturday at most sites. Hours are determined at each site.
4. The test is open book, multiple choice, and 50 questions, with a 2-hour time limit.
5. You can order the book by calling the publisher directly at (623) 587-9519.
   Order the following:  
   Arkansas Contractors Guide to Business, Law and Project Management
6. 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.
7. Permanent tabs are permitted.  
   (Permanent tabs are defined as tabs that would tear the page if removed)
8. Temporary tabs are NOT permitted.  
   (Temporary tabs are defined as post-it notes or other tabs that may be removed without tearing the page)
9. Applicants with disabilities or those who would otherwise have difficulty taking the examination should request for alternative arrangements by calling P.S.I at 855-257-1620.
10. 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 responsible to get the passing test score to our office by fax 501-372-2247 or regular mail. 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 order a copy of the NASCLA Contractors Guide to Business, Law and Project Management, Arkansas Edition, Tabs Bundle Pak, you can visit the NASCLA website bookstore at www.nascla.org. You can also order by mailing a copy of this order form to the address below with credit card information.

NASCLA  
23309 N. 17th Drive, Suite 110  
Phoenix, Arizona 85027  
Phone (623) 587-9354 Fax (623) 587-9625 or  
Online @ www.nascla.org

The NASCLA Contractors Guide to Business, Law and Project Management, Tabs Bundle Pak offers our permanent reference tabs that will help you navigate quickly through this publication. Please note that these tabs are self-adhesive and must be added at least one day prior for sufficient adhesive power.

SHIP TO:  
Name ______________________________________________________________________________________  
Company ____________________________________________________________________________________  
Mailing Address ______________________________________________________________________________  
City ____________________________________ State ____________ Zip ___________________  
Telephone (_____) ___________ - ________________ Fax (______) ______ - _____________________________  
Email Address ________________________________________________________________________________

METHOD OF PAYMENT (Due to possible added sales tax, checks are not accepted):  
☐ Visa ☐ MasterCard ☐ American Express ☐ Discover  
Card Number ______________________________________________ Exp. Date _____ /______ CVC ________  
Name on Card ___________________________ Signature ____________________________________________

PLEASE SEND:  
_____ Copy(ies) of the NASCLA Contractors Guide to Business,  
Law and Project Management, Arkansas Edition Tabs Bundle Pak @ $87.99 $_________  
_____ Copy(ies) of the NASCLA Contractors Guide to Business,  
Law and Project Management, Arkansas Edition (book only) @ $78.00 $_________

SHIPPING & HANDLING:  
$ 15.95 USPS for one book ($6.00 for each additional book) $_________

SALES TAX: Additional State Sales Tax Rates could apply.  

TOTAL $_________