State of Arkansas  
Contractors Licensing Board

AMENDED CLASS REQUEST  
ADDING NEW Subcontractor Registration CLASSIFICATION(S) / SPECIALTY(S) 

INSTRUCTIONS

This application will not be considered, unless the $100.00 filing fee (NON-refundable), amended class form, and affidavit are returned, as well as any copies of required trade license(s) / certification(s) as described below. This application will only be valid for 90 days once received in our office. After 90 days another fee, form, etc. will be required. (Any form signed over 90 days cannot be accepted.)

NOTE: If requesting any of the classes listed below, the appropriate Arkansas trade license / certificate from the approved entity (see the boxed section on the enclosed page 4 for more information on where to call to obtain needed trade license/certificate) MUST be in place before requesting these classes. We must also have a copy of that trade license / certificate before we can process an application for any of these classes.

Example: Boiler Construction & Repair requires a Boiler Construction License from the Arkansas Department of Labor.  

The following classifications require an Arkansas Trade license/certificate (see boxed area page 4 for detailed list)

<table>
<thead>
<tr>
<th>HVACR</th>
<th>Plumbing</th>
<th>Electrical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiler Construction</td>
<td>Boiler Repair</td>
<td>Asbestos</td>
</tr>
<tr>
<td>Lead Abatement</td>
<td>Elevators</td>
<td>Fire Sprinklers</td>
</tr>
<tr>
<td>Underground Storage Tanks</td>
<td>Fire &amp; Burglar Alarms</td>
<td>Water Wells</td>
</tr>
<tr>
<td>Septic Tanks</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. FILING FEE – $100.00 filing fee is required. Fees are non-refundable. Send money order or check made out to CLB or Contractors Licensing Board with this application.

2. AMENDED CLASS APPLICATION including AFFIDAVIT – Page 2  
Read, complete, and sign

3. CLASSIFICATION SELECTION – page 3 & 4 – Circle any all classifications you wish to have on your Subcontractor Registration. You must provide a trade license for any classification marked with an **

DEFINITIONS:

QUALIFIER: A person that has passed the appropriate trade examination. To act as a “Qualifying Party” a person must be either; (1) a sole owner; (2) a partner of the partnership who is actively engaged in the day to day activities of the licensed entity; (3) an officer of the corporation who is actively engaged in the day to day activities of the licensed entity; (4) a member of the Limited Liability Company who is actively engaged in the day to day activities of the licensed entity; (5) a partner of the limited Liability Partnership who is actively engaged in the day to day activities of the licensed entity; or (6) a full time paid employee of the licensed entity.

FULL TIME EMPLOYEE: A person who is an actual employee of the business, not an independent contractor. The person must work, on average, 30 or more hours a week for the licensed entity (1500 hours per year), must not be paid as an independent contractor (not receive a “1099” for his earnings but receive a “W-2” for his earnings). A full-time employee is not someone who is hired “job to job” as needed. Other factors to be considered in making this determination include but are not limited to: whether the licensed entity pays for workman’s compensation insurance on the individual, whether the licensed entity pays payroll taxes on the individual, the amount of control the licensed entity has over the activities of the individual, the ownership of the tools used by the individual and, whether the individual maintains his own business separate from the licensed entity in question.

Subcontractor Registration Amended Class Form  1.   Revised 9/2022
AMENDED CLASS APPLICATION -
Sub-Contractor Registration - New Application

State of Arkansas
CONTRACTORS LICENSING BOARD
4100 Richards Road
North Little Rock, Arkansas  72117
Phone (501) 372-4661

ID# ___________________
(Located in the upper right hand corner of your license.)

FILING FEE:$___________

Use The Name Issued on the Contractors License:

<table>
<thead>
<tr>
<th>Licensed Entity Name:</th>
<th>Registration #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name & Phone # of person completing this form:

1. REQUESTED CLASSIFICATION:
   Please circle those classifications being requested on page 4 and 5 attached

2. Answer the following question by checking Yes or No in the space provided

   ___Yes  ___No   Has the licensed entity bid, contracted, or performed any work that would require an Arkansas Contractors License with regards to the request of this amendment form? If yes, attach details separately (List projects, address, date started, and dollar amount).

3. Complete and sign the below affidavit

   AFFIDAVIT
   
   I ______________________________, being duly sworn, deposes and says:
   (Print name of Owner/Officer/Partner/Member)
   That the foregoing statement of experience and all statements herein contained are true and correct and shall become a part of the present valid application on file. That the foregoing statement is submitted to the Contractors Licensing Board and/or Residential Contractors Committee for the purpose of amending the present valid license and that any depository, vendor or other agency herein named is hereby authorized to supply the Contractors Licensing Board and/or Residential Contractors Committee with any information necessary to verify these statements.

   ______________________________
   Signature of Owner/Officer/Partner/Member

Subcontractor Registration Amended Class Form  2.    Revised 9/2022
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.
If adding a class that requires a trade license you will need to complete pages 5 & 6 for the qualifying individual, you wish to have listed.

Above Ground Tanks

** Asbestos
Awnings, Canopies & Gutters
Base & Paving
  a. Base Construction
  b. Hot & Cold Mixes
  c. Surface Treatment
  d. Asphalt
  e. Concrete Paving
Blinds, Curtains, Draperies, Theatrical
Boat Docks

** Boiler Construction & Repair
Bulk Storage Facilities
Cable Television Lines (Above & Below Ground)
Car Washes
Carpentry, Framing, Millwork, Cabinets
Ceilings, Wall Systems, Acoustical Treatments
Chemical Resistant Tile & Brick
Chimneys, Fireplaces
Cofferdams, Dikes, Levees, Canals
Communication, Computer or Sound Systems, Cabling
Concrete
Control Systems & Instrumentation
Conveyors, Material Handling Systems, Cranes, Hoists
Cooling Towers
Demolition, Blasting
Dredging
Drywall
** Electrical
Electrical Transmission Lines
** Elevators, Escalators, Dumbwaiters, Chairlifts
Energy & Chemical Pipelines
Energy Management, Retrofit Systems
Environmental General
Erosion Control
** Factory Trained Medical Equipment Technician ("exemption" from Electrical Board required)
Fencing, Gates
Fiberglass
Fireproofing
Floors, Floor Covering
Foundation Construction or Drilling, Pile Driving, Stabilization
Furnaces, Fuel Burning or Heat Transfer Equipment,
  Stokers, Refractories
Furniture, Recreational and/or Playground Equipment,
  Bleachers, Seating, Partitions

** Gas Fitter
Generators, Turbines
Glass, Glazing, Doors, Windows, Hardware, Storefront
Golf Cart & Foot Bridges & Paths
Golf Courses

Grain Bins
Greenhouses

** Heating, Ventilation, Air Conditioning, Refrigeration
HRA Miscellaneous & Specialty Items
  a. Traffic Safety
    1. Pavement Markers
    2. Signaling
    3. Guardrails & Fencing
    4. Attenuators, Signalization & Roadway Lighting
  b. Landscaping
    1. Seeding
    2. Sodding
    3. Planting
    4. Chemical weed & brush control
  c. Pavement Rehabilitation
    1. Pressure grouting
    2. Grinding & grooving
    3. Concrete joints
    4. Underdrains
  d. Miscellaneous Concrete
    1. Sidewalks
    2. Driveways
    3. Curb & gutter
    4. Box culverts

Hydraulics
Incinerator & Stack Construction
Institutional & Kitchen Equipment
Interior Work
Kilns, Drying Systems
Landfills
Landscaping, Irrigation, Lawn Sprinkler Systems, Streams
** Landscaping with Planting
Lathe, Plaster, Stucco, Dryvit, EIFS

** Lead Abatement
Lift Stations, Pumps
Lightning Protection
Liners
Marine Docks
Masonry
Mausoleums
Medical Shielded Enclosures
Metal Buildings, Detached Structures, Storage Buildings
Metal Studs, Walls
Meter Installation & Service
Microwave Systems, Towers, Satellite Dishes
Millwright
Oil & Gas Field Construction, Rigging
Overhead Doors & Dock Equipment
Paint Booths

Subcontractor Registration Amended Class Form

3. Revised 9/2022
CLASSIFICATIONS (Continued from page 3) - **Requires a Arkansas Trade License or Certification

- Grading & Drainage (Includes Pipe & Structures, Culverts, Clearing, Grubbing & Rip Rap, Excavation)
  
  - Painting, Wallcovering
  - Passenger Boarding Bridges

- Piping, Process Piping, Valve Repair
- Plant Maintenance
- Plating & Waste Treatment Systems

** Plumbing

- Pneumatic Tube Systems
- Pollution, Air & Dust Control, Blower & Exhaust Systems
- Poultry & Swine Electrical
- Poultry & Swine Houses
- Poultry (HVACR)
- Precipitators
- Railroad Construction & Related Items
- Rebar

** Refrigeration, Cold Storage

- Remediation
- Remodeling, Renovations, Restoration, Alterations
- Retaining Walls
- Right of Way Clearing
- Roofs, Roof Decks, Roofing Sheet Metal
- Sandblasting, Hydroblasting, Dry Ice Blasting
- Scaffolding
- Scales

** Septic Tank Installation & Repair

- Security, Banking, Detention Equipment
  - (Bars & safety no certificate needed)
- Service Station Equipment

** Sheet Metal, Ducts, Ventilation

- Siding, Soffit, Facia, Gutters

** Signal or Burglar Alarms, Fire Detection & Monitoring Systems

- Skylights
- Solar Systems
- Special Coatings or Applications, Caulking, Waterproofing
- Sport & Recreational Surfaces

** Sprinklers, Fire Protection

- Steel, Alloy, Ornamental, Metal Fabrication, Welding
- Storm Shelters
- Substations
- Swimming Pools, Spas
- Temperature Controls (Electric)
- Temperature Controls (Pneumatic)
- Testing & Balancing
- Tile, Terrazzo, Marble, Countertops
- Tuckpointing
- Tunnels, Shafts
- Underground Piping, Cable, Trenching, Boring

** Underground Storage Tanks

- Water and Sewer Lines
- Water Lines Associated with Fire Protection

** Water Wells

- Wind Turbines

If any of the following specialty(s) are being requested, then attach a copy of the Arkansas trade license/certificate.

1. Asbestos (call 501-682-0718)
2. Boiler Construction & Repair (call 501-682-4513)
3. Electrical (call 501-682-4549)
4. Elevators, Escalators, Dumbwaiters, Chairlifts (call 501-682-4530)
5. Gas Fitter (call 501-661-2642)
6. HVAC (call 501-682-9201)
7. Landscaping w/Planting (call 501-225-1598)
8. Lead Abatement (call 501-671-1472)
9. Plumbing (call 501-661-2642)
10. Refrigeration, Cold Storage (call 501-682-9201)
11. Septic Tank Installation & Repair (call 501-661-2171)
12. Sheet Metal, Ducts, Ventilation (call 501-682-9201)
15. Underground Storage Tanks (call 501-682-0993)
16. Water Wells (call 501-682-3900)

Complete the following section for each person that holds an Arkansas trade license/certificate (if more than one attach information separately).

Name ________________________________________   Social Security # _____________________________

Position held with this company, check one: _______ Sole Owner
                                               _______ Full time paid employee
                                               _______ Officer, member, or partner of the company and
                                        is actively involved in the day-to-day operations

Subcontractor Registration Amended Class Form 4. Revised 9/2022
Complete the following pages ONLY if you are requesting a classification that requires a Trade license. Marked by ** in the list above

Arkansas Contractors Licensing Board
4100 Richards Rd.
North Little Rock, AR 72117
Fax - 501-372-2247

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: ________________________________

Subcontractor Registration Amended Class Form 5. Revised 9/2022
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.

**This page MUST be completed in FULL**

**OFFICERS**

List ANY/ALL officers with Full names and complete social security numbers of ALL individuals:

President ________________________________ SSN ________________________________

Vice-President ____________________________ SSN ________________________________

Secretary ________________________________ SSN ________________________________

Treasurer ________________________________ SSN ________________________________

**OWNERS**

List ANY/ALL individuals who own 10% or more of the company that is applying for a registration. List Full names and complete social security numbers of ALL Individuals:

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Name__________________________ SSN ________________________________

Subcontractor Registration Amended Class Form  6.    Revised 9/2022
Complete this form ONLY if you answered yes to question # 2 on page 5 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: _________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________
    _____________________________________________________________________________________