

License Name/Address Change & Duplicate License Request

Michigan Department of Licensing and Regulatory Affairs Bureau of
Construction Codes/ Licensing Division
P.O. Box 30255, Lansing, MI 48909
517-241-9316
lara-bcc-licensing@michigan.gov

Authority: 1980 PA 299, MCL 338.3434a Penalty: Failure to provide information may result in denial of your request.	LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
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General Instructions:

- **Mail completed application and payment made payable to "State of Michigan" to address listed above**

Use a separate form for each license number.

If you are applying for a Company name/entity change you must use the Residential Builder or Maintenance and Alteration Contractor Company License or Relicense Application.

******* Any documentation submitted with your application becomes property of the State of Michigan and will not be returned.**

Applicant Information

NAME ON CURRENT LICENSE (including D/B/A, if applicable)		LICENSE NUMBER	
NEW NAME REQUESTED (including D/B/A, if applicable)			
NEW ADDRESS REQUESTED (if applicable)	CITY	STATE	ZIP CODE
TELEPHONE NUMBER (Include Area Code)		E-MAIL ADDRESS	

FEE PAYMENT INFORMATION - CHECK ALL THAT APPLY (\$10.00 PER LICENSE REPRINT) Name changes require license reprint, if request is for an address change only a reprint of the licenses is not needed and no fee is required. All fees are nonrefundable per the State license fee act. Mail fee and completed application to the address listed above.
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CHECK THE LICENSE TYPE	FOR OFFICE USE ONLY
<input type="checkbox"/> Individual Residential - (2101-32) <input type="checkbox"/> Residential Building Company - (2102-32) <input type="checkbox"/> Individual Maintenance & Alteration Contractor - (2103-32) <input type="checkbox"/> Maintenance & Alteration Contractor Company - (2104-32) <input type="checkbox"/> Salesperson - (2105-32) <input type="checkbox"/> Branch Office - (2106-32) <input type="checkbox"/> Name Change - \$10.00 <input type="checkbox"/> Address Change with Reprint - \$10.00 <input type="checkbox"/> Address Change, No Reprint - No Fee <input type="checkbox"/> No Data Change, Duplicate License request - \$10.00	

CERTIFICATION	
I certify that the statements in this document are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law.	
SIGNATURE	DATE