

# Residential Builder Company or Maintenance & Alteration Contractor Company License or Relicense Application

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  
 Penalty: Failure to provide information may result in denial of your request.

## DO NOT SUBMIT THIS APPLICATION UNTIL YOU HAVE A LICENSED QUALIFYING OFFICER.

### General Instructions:

- Your application will be incomplete and not processed without **ALL** the following **REQUIRED** documents attached to the completed application.
- Non-Michigan residents** must submit a Copy of Corporate Resolution Authorizing the Consent to Service of Process. The Consent to Service of Process form may be found at [www.michigan.gov/bcc](http://www.michigan.gov/bcc)
- Mail completed application, required documents, and license fee to the address listed above. The company name and any assumed names must match the name on file with the Corporations Division. You may find more information at [www.michigan.gov/cscl](http://www.michigan.gov/cscl)
- Any documentation submitted with your application becomes property of the State of Michigan and will not be returned.
- Print clearly. This is a legal document. Failure to do so may result in delays in processing.**

COMPANY NAME		ENTITY ID NUMBER	
ASSUMED NAME (if applicable)			
CHECK ENTITY TYPE:			
<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Limited Partnership (LP)			
BUSINESS ADDRESS (Not a PO Box)	CITY	STATE	ZIP CODE
TELEPHONE NUMBER (Include Area Code)		E-MAIL ADDRESS	

### Qualifying Officer Information

NAME	BUILDERS LICENSE NUMBER
<b>All partners, officers, or members of the corporation, LLC or Partnership have the ability and will serve the public in a fair, honest, and open manner. If there has been a judgment of guilt in a criminal proceeding or a civil action against them, they are rehabilitated, or the substance of a former offense is not reasonably related to the occupation or profession for which they are seeking a license.</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are each applicant, partner, officer, or member at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### 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. I agree the Department is required by law to obtain my social security number pursuant to MCL 338.3434a.			
QUALIFYING OFFICER SIGNATURE		DATE	
<b>CHECK THE LICENSE TYPE</b>	<b>NON-REFUNDABLE FEE</b>	<b>FOR OFFICE USE ONLY</b>	
<input type="checkbox"/> Residential Builder Company License    \$195.00	(2102-01= \$165.00) (2102-15= \$30.00)	LICENSE NUMBER	ISSUE DATE
<input type="checkbox"/> Residential Builder Company Relicensure    \$185.00	(2102-06= \$170.00) (2102-15= \$30.00)		
<input type="checkbox"/> Maintenance & Alteration Company License    \$195.00	(2102-01= \$165.00) (2102-15= \$30.00)		
<input type="checkbox"/> Maintenance & Alteration Company Relicensure    \$185.00	(2102-06= \$170.00) (2102-15= \$30.00)		
<b>MAKE CHECKS PAYABLE TO THE STATE OF MICHIGAN</b>			