

**Residential Builder or Maintenance & Alteration Contractor License or Relicense Application**  
**Michigan Department of Licensing and Regulatory Affairs**  
**Bureau of Construction Codes/ Licensing Section**  
**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. Requests for accommodations should be directed to PSI directly after being approved to test.
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**General Instructions:**

- You must submit a copy of your operator's/driver's license or state personal identification card with this application.
- You must submit the certificate of completion for the 60-hour Prelicensure Course.
- **The law requires you to maintain a place of business in Michigan. A P.O. Box is not sufficient.** Please provide your Michigan business address.
- This is an application for an individual license. **You cannot list an LLC or Corporation on an individual license.** Once you hold an individual license, you may apply for a company license at that time.
- Non-Michigan residents must submit a Consent to Service of Process. This form may be found under License Applications & Forms at [www.michigan.gov/bcc](http://www.michigan.gov/bcc)
- Mail your completed application, required documents, and non-refundable license fee to the address listed above.
- Note: A veteran providing satisfactory proof of separation from the armed forces of the United States under "honorable" or "general under honorable conditions" is exempt from the initial license fee only. For consideration, please attach a copy of either a DD-214, and/or DD-215 to your application.
- **Print clearly. This is a legal document. Failure to do so may result in delays in processing.**

LEGAL GOVERNMENT NAME (First, Middle, Last)		SOCIAL SECURITY NUMBER	
MICHIGAN BUSINESS ADDRESS ( <b>CANNOT BE A P.O. BOX</b> )	CITY	STATE	ZIP CODE
BUILDERS LICENSE NUMBER (for re-licensure applications ONLY)	TELEPHONE NUMBER (Include Area Code)	E-MAIL ADDRESS	
DBA ( <b>if none leave blank-cannot be an LLC or Corporation</b> )			

<p><b>I have the ability and will serve the public in a fair, honest, and open manner. If I had a judgement of guilt in a criminal proceeding or a civil action against me, I am rehabilitated, or the substance of my former offense is not reasonably related to the occupation or profession for which I am seeking a license.</b></p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p>
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<p><b>For Re-licensure Applicants only:</b> Do you have any unsatisfied penalties and conditions imposed by disciplinary action in this state or any other jurisdiction?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p>
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<p>Have you completed the required 60 hours of approved prelicensure education consisting of at least 6 hours of courses in each of the following areas of competency:</p> <p>1) Business management, estimating, and job costing, 2) Design and building science, 3) Contracts, liability, and risk management, 4) Marketing and sales, 5) Project management and scheduling, 6) the current Michigan residential code and Construction safety standards promulgated under the Michigan occupational safety and health act, 1974 PA 154, MCL 408.1001 to 408.1094?</p> <p><b>Please submit a copy of your prelicensure certificate with the completed application.</b></p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No</p>
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**For Applicants who have served in the Armed Forces only:** Are you requesting a prelicensure education waiver?

Yes  No

If requesting a prelicensure education waiver you will also need to submit:

An affidavit signed by a commanding officer, supervisor, or military superior with direct knowledge of the service you have, entry-level experience in or basic knowledge of each of the areas of prelicensure competencies.

OR

If you meet the requirements of the armed forces exemption, but do not have entry-level experience in or basic knowledge of each of the areas of prelicensure competencies, you may provide an affidavit signed by a commanding officer, supervisor, or military superior with direct knowledge of your service that states in which of those areas of competency you have entry-level experience or basic knowledge. (The department may in its discretion grant the applicant credit toward the 60-hour prelicensure education requirement based on that experience or knowledge.)

**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.

SIGNATURE	DATE
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CHECK THE LICENSE TYPE	NON-REFUNDABLE FEE	FOR OFFICE USE ONLY	
		LICENSE NUMBER	ISSUE DATE
<input type="checkbox"/> Individual Residential Builder \$195.00	(2101-01 = \$165.00) (2101-15 = \$ 30.00)		
<input type="checkbox"/> Individual Residential Builder-Veteran Fee Waived			
<input type="checkbox"/> Individual Residential Builder Relicensure \$185.00	(2101-06 = \$170.00) (2101-15 = \$ 15.00)		
<input type="checkbox"/> Individual Maintenance & Alteration Contractor \$195.00	(2103-01 = \$165.00) (2103-15 = \$30.00)		
<input type="checkbox"/> Carpentry (A) <input type="checkbox"/> House Wrecking (R) <input type="checkbox"/> Concrete (B) <input type="checkbox"/> Screens & Storm Sash (N) <input type="checkbox"/> Excavation (D) <input type="checkbox"/> Gutters (O) <input type="checkbox"/> Roofing (M) <input type="checkbox"/> Tile & Marble (P) <input type="checkbox"/> Masonry (I) <input type="checkbox"/> Swimming Pools (S) <input type="checkbox"/> Insulation Work (G) <input type="checkbox"/> Basement Waterproofing (T) <input type="checkbox"/> Siding (K)			
<input type="checkbox"/> Individual Maintenance & Alteration Contractor-Veteran Fee Waived			
<input type="checkbox"/> Individual Maintenance & Alteration Contractor Relicensure \$185.00	(2103-01 = \$170.00) (2103-15 = \$15.00)		
<b>MAKE CHECKS PAYABLE TO THE STATE OF MICHIGAN</b>			