



Alabama Department of Workforce
Inspections Division
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Montgomery, AL 36130
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Kay Ivey
Governor

Greg J. Reed
Secretary of
Workforce

Application for Elevator Contractor's License

Check appropriate box:

Sole Proprietor [] Partnership [] Domestic Corporation [] Other Corporation []

If a **Sole Proprietor**, name, residence and business address of the applicant. If a **Partnership**, name, residence and business address of each partner. If a **Domestic Corporation**, name and business address of the corporation and the name and residence address of the principal officer of the corporation. If an **Other Corporation** (not domestic), name and address of local agent authorized to accept service of process and official notices. Provide all information on additional sheets and attach to this application if necessary.

Name (applicant) _____
Resident Address _____
City _____ State _____ Zip Code _____
Phone _____ Email _____

Business Name _____
Business Address _____
City _____ State _____ Zip Code _____
Phone _____ Email _____

Applicant Social Security (Required by Federal/State law for **new** license) _____

Are you a US Citizen? Yes () No () If Yes, provide a copy of driver's license or other acceptable form of identification. If No, provide acceptable documentation from the US Government with this application. For a list of acceptable identification you can visit our website at: http://labor.alabama.gov/docs/law/Inspections_AcceptableFormsofIdentification.pdf

Elevators Contractor's License

Covers all activities of installation, alteration, service, replacement, repair or maintenance on all conveyances under Statute 25-13-1 (short title). **Must provide with this application:**

- 1) A current insurance policy, or certified copy thereof, issued by an insurance company authorized to do business in the State, to provide general liability coverage of at least one million dollars (\$1,000,000) for injury or death of any number of persons in any one occurrence and at least five hundred thousand (\$500,000) for property damage in any one occurrence and the statutory workers' compensation insurance coverage.
- 2) Must have an Alabama Licensed Mechanic in employment to receive this license.
- 3) Check or money order in the amount of \$300.00 for new license or \$200.00 for renewal, payable to: Alabama Department of Workforce.

Number of years engaged in the business of installing, maintaining, repairing, or servicing elevators or related conveyances _____.

Approximate number of employees to be employed by this contractor _____.

Applicants criminal record of convictions, if any as verified by ALEA _____.

Signature _____ Date _____

OFFICIAL USE ONLY

Approved _____ Date _____