State of Florida Department of Business and Professional Regulation Electrical Contractors' Licensing Board Request for Address or Personal Name Change Form # DBPR ECLB 7

APPLICATION CHECKLIST – IMPORTANT – Submit all items on the checklist below with your application to ensure faster processing.

APPLICATION REQUIREMENTS

Applicants submitting a contractor name change must submit:

□ Supporting legal documentation of name change (e.g. court documents showing name change, marriage license, divorce decree, etc.)

Please mail your completed application and documentation to:

Department of Business and Professional Regulation 2601 Blair Stone Road Tallahassee, FL 32399-0783

INSTRUCTIONS

If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.

1. General Requirements for Registration

- **a.** This form is required if you are a contractor and you are updating your personal information with the Department of Business and Professional Regulation Electrical Contractors' Licensing Board.
- **b.** This form is also required if you are updating a business address with the Department of Business and Professional Regulation Electrical Contractors' Licensing Board.
- c. Note: This form is not required for changes to a business name or changes in qualifying agents.

2. Application Instructions (by section)

a. Section I- Transaction Types

i. Select the transactions you wish to conduct. Note that you may complete multiple transactions with this form at one time.

b. Section II- Applicant Personal Information

- i. Each applicant must provide their license number and the name on their current license.
- ii. For each transaction you wish to complete, fill out the appropriate section completely.
 - (1) Contractor Change of Name: Applicant must provide their changed name with supporting legal documentation showing the name change.
 - (2) Change of Mailing Address: Applicant must provide their new mailing address.
 - (3) Change of Contact Information: Applicant must provide their updated contact information.
- iii. Change of Business Address: Applicant must provide their new business location address if their business has changed locations.

c. Section III- Affirmation by Written Declaration

- i. Please read and sign the affirmation by written declaration.
- ii. If the applicant fails to sign the affirmation statement, the Department will not process the application.

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TRANSACTION TYPE - Note: Choose all applicable transactions. [08xx/9006]

□ Change Business Address

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Section I – Transaction Type

□ Contractor Name Change

☐ Change Mailing Address	☐ Change Contact Information			
Section II – Applicant Personal Information				
LICENSEE IN	VFORM <i>A</i>	TION		
License Number:				
Licensee Name (previous):				
*Licensee Name (new, if applicable)				
*NOTE: A change of Name requires submitting supporting legal documentation of name change. See Instructions at the beginning of this application for more information.				
NEW MAILING ADDRESS				
Street Address or P.O. Box				
		Г <u>а</u> . ,		
City		State	Zip Code (+4 optional)	
County (if Florida address)	Country	у		
NEW CONTACT INFORMATION				
Primary Phone Number Primary E-Mail A	Address			
NEW BUSINESS LOCATION ADDRESS				
Business/Firm Name				
Street Address				
City		State	Zip Code (+4 optional)	
County (if Florida address)	Country	у		



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Section III – Affirmation by Written Declaration

AFFIRMATION BY WRITTEN DECLARATION				
I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.				
Signature:	Date:			
Print Name:				

Eff. date:April 2021

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