ARIZONA REGISTRAR OF CONTRACTORS

Katie Hobbs, Governor *Jeff Fleetham, Director*

Form RC-L-201D	APPLICATION FOR A NEW QUALIFYING PARTY

INSTRUCTIONS

Use this Application for a New Qualifying Party to add/replace a qualifying party on an existing license.

Mail-in or drop off the application and required documentation to:

Arizona Registrar of Contactors
1700 W. Washington St., Ste. 105
Phoenix, Arizona 85007

CHECKLIST

In addition to submitting the Application form, you must also submit the following:

- ☐ **Exam Results.** The new Qualifying Party's original exam results, Out of State Waiver Form, In-State Trade Exam Waiver Form, and/or In-State SRE Waiver Form.
- ☐ **Background Check.** A copy of the payment transaction receipt from the background check for the new Qualifying Party.
- ☐ **Fees.** A non-refundable $100 application fee.
- ☐ **Government-Issued Identification.** A legible copy of a government-issued photo identification for the new Qualifying Party. Acceptable forms of identification include a valid driver's license or passport.
- ☐ **Supplemental Disclosure Forms.** Include any applicable disclosure forms requested in Part 3.
- ☐ **Signatures.** Completed Signatures section.

Note: If you are replacing the Qualifying Party for more than one license, you must complete a separate Application for a New Qualifying Party for each license.

AGENCY DISCLOSURE

Pursuant to A.R.S. § 41-1030(G), the Registrar provides the following disclosures:

- **A.R.S. § 41-1030(B):** An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- **A.R.S. § 41-1030(D):** This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.
- **A.R.S. § 41-1030(E):** A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the agency's adopted personnel policy.
- **A.R.S. § 41-1030(F):** This section does not abrogate the immunity provided by § 12-820.01 or 12-820.02.

ARIZONA REGISTRAR OF CONTRACTORS

Katie Hobbs, Governor | *Jeff Fleetham, Director*

Form RC-L-201D	APPLICATION FOR A NEW QUALIFYING PARTY

PART 1: LICENSE INFORMATION

Provide the following information for the license you wish to add a Qualifying Party to.	
1. Business Name on License or Sole Proprietor's Full Name, including DBA if applicable	
2. License Classification	3. License Number
4. Current Status of License (e.g. 'current', 'suspended', 'revoked', or 'inactive')	

Workers' Compensation Coverage		
Applicants are required to be in compliance with the statutes and rules governing Workers' Compensation coverage. *See* A.R.S. § 32-1122(B)(1)(i). In general, if you have any employees, you must have Workers' Compensation insurance. Please choose your Workers' Compensation coverage type from the list below:		
1. Workers' Compensation Insurance:	Policy Number	Company Issuing Policy
2. Self-Insured Employer (You Must Submit Documentation Showing Proof of Coverage With This Application)		
3. Exempt: Any of the following *without any employees*: Sole-Proprietorship, Single Member LLC, 50/50 Two-Member LLC, 50/50 Shareholder Corporation, or a Partnership. (YES) (NO)		

PART 2: CURRENT QUALIFYING PARTY INFORMATION

If you have previously submitted a Notice of Disassociation for the Qualifying Party, then you do not need to complete this Part 2.

This section allows an Authorized Representative of the entity listed in Part1 to disassociate the current Qualifying Party upon the approval of the new Qualifying Party listed in Part 3 of this Application.

Note: *This does not remove the current Qualifying Party as an Owner, Officer/Director, or Member/Manager of the entity listed in Part 1. An Ownership/Personnel Change Form must be submitted to make changes to any owners and/or personnel.*

1. Name of Current Qualifying Party (The person who will be disassociated/removed/replaced on the license)			
2. Current Qualifying Party's Phone Number	3. Current Qualifying Party's Email Address		
4. Current Qualifying Party's Residential Address	City	State	Zip Code

PART 3: NEW QUALIFYING PARTY INFORMATION

The "Qualifying Party" is a person who is regularly employed by the Applicant and is actively engaged in the classification of work for which the person qualifies on behalf of the Applicant.

- *The Qualifying Party must have the necessary experience, knowledge, and skills to supervise or perform the contracting work.*

1. Name as it appears on your government issued ID		2. Date of Birth (MM/DD/YYYY)	
3. Driver's License or Government ID No.		4. Social Security Number	5. Are you a U.S. Citizen?
6. Residential Address	City	State	Zip Code
7. New Qualifying Party's Phone Number		8. New Qualifying Party's Email	

CONSENT	SELECT ALL THAT APPLY
I consent to receive notifications from the Registrar at the contact information provided above via	☐ Text Message ☐ E-mail

"Notifications" include renewal notices and monthly newsletters. By consenting to receive notifications via text or email, you will not be excluded from receiving notifications by regular mail. You consent by entering the information above.

DISCLOSURES

Failure to accurately answer these questions is a material misrepresentation of fact and a violation of A.R.S. § 32-1154(A)(5).

DISCIPLINED LICENSE INFORMATION *If 'yes' is selected for question 1, the new Qualifying Party must complete and attach a Disciplined License Disclosure Form with this application.*	***Select One***
1. Has the new Qualifying Party ever been named on a contractor's license in any state (including Arizona) that was revoked, disciplined, or suspended?	☐ **Yes** ☐ **No**
FELONY CHARGES *If 'yes' is selected for questions 2-3, the new Qualifying Party must complete and attach the Felony Disclosure Form with this application. Answering 'yes' does not automatically disqualify the Applicant from becoming the new Qualifying Party on the existing license.*	***Select One***
2. Has the new Qualifying Party ever been convicted of a felony?	☐ **Yes** ☐ **No**
3. Does the new Qualifying Party have a felony charge pending?	☐ **Yes** ☐ **No**
UNLICENSED ACTIVITY *If 'yes' is selected for question 4, the new Qualifying Party must complete and attach the Unlicensed Activity Disclosure Form with this application.*	***Select One***
4. Has the new Qualifying Party ever received a citation for, or been convicted of, contracting without a license in any state (including Arizona)?	☐ **Yes** ☐ **No**

PART 4: RELEVANT EXPERIENCE

RELEVANT EXPERIENCE

The Qualifying Party must demonstrate sufficient experience as required by the desired license classification. The required amount of experience can be determined by referring to the License Classification Requirements table. In addition to providing practical and managerial work experience, technical training, military service, diplomas, or certifications may be used to meet the experience requirements, or a portion of the experience requirements.

- *Under A.R.S. § 32-1122(E)(1), at least two years of experience must be earned within the last ten years.*
- *If additional space is needed, complete and attach as many "Relevant Experience" pages as necessary.*

1. Business Name of Employer or "Self-Employed"	
2. Duration of Experience (e.g. "1/1/2007 through 1/1/2017")	3. Average Hours Worked Per Week
4. Position(s)	5. Size of Projects Qualifying Party Worked On (Square Foot and/or Dollar Amount)
6. Description of Qualifying Party's Main Duties and Specific Trades They Have Performed or Supervised.	

EXPERIENCE REFERENCE

*Include the name and contact information for a reference who can verify the new Qualifying Party's experience. The reference must have direct, **first-hand knowledge** of the new Qualifying Party's experience. **The reference cannot be a person already named on the existing license.***

7 Reference's Name	8. Relationship of Reference to Qualifying Party (e.g. "Co-worker"; "Employer"; "Supervisor")		
9. References Mailing Address	City	State	Zip Code
10. Reference's Phone Number	11. Reference's E-mail Address		

PART 5: SIGNATURES

Authorized Representative

*An Authorized Representative must sign this form. An **Authorized Representative** is an individual that is already listed on the license as an owner or operator. If an Authorized Representative does not sign this form, the Registrar will not accept this application.*

I acknowledge that I am a Person named on this license for the purposes and duties of all Registrar statutes and rules, including, but not limited to, A.R.S. §§ 32-1122, 32-1139(B) & 32-1154.

I certify that I have reviewed the entire contents of this application and all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate. I understand that falsification of any information on this application is a violation of the Arizona Criminal Code in Arizona Revised Statutes, Title 13, Chapter 27. I understand that pursuant to A.R.S. §§ 32-1154(A)(5), (19), & 32-1122(C), providing false information is cause for denial of this application and cause for discipline of ROC licenses.

I acknowledge and authorize the below-named New Qualifying Party to be the Qualifying Party named on this license.

I acknowledge and authorize the disassociation of the current Qualifying Party listed in Part 2 upon the approval of the New Qualifying Party listed in Part 3 of this Application.

_____	_____	_____
Print Name	Signature	Date

New Qualifying Party

The person listed in Part 3: New Qualifying Party Information must sign this application.

I certify that I have reviewed the entire contents of this application and all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate. I understand that falsification of any information on this application is a violation of the Arizona Criminal Code in Arizona Revised Statutes, Title 13, Chapter 27. I understand that pursuant to A.R.S. §§ 32-1154(A)(5), (19), & 32-1122(C), providing false information is cause for denial of this application and cause for discipline of ROC licenses.

I acknowledge that if approved, I will be a person named on this license for the purposes and duties of all Registrar statutes and rules, including, but not limited to, A.R.S. §§ 32-1122, 32-1139(B), 32-1154, and 32-1162(B). These purposes and duties include liability for violations arising out of or relating to agreements that were entered into, monies received, or work performed while I am named on this license.

I understand that because A.R.S. § 32-1162(A) establishes a two-year period for the filing of complaints, my liability for violations of Registrar statutes and rules continues for up to two years after I disassociate from this license.

By submitting this application, I consent to a criminal background investigation pursuant to A.R.S. § 32-1122(H).

_____	_____	_____
Print Name	Signature	Date