PHOENIX OFFICE
1700 W. WASHINGTON ST. SUITE 105
PHOENIX, AZ 85007-2812
(602) 542-1525 or AZ TOLL-FREE
1-877-MY AZROC (1-877-692-9762)

TUCSON OFFICE
400 W. CONGRESS, STE. 212
TUCSON, AZ 85701-1311
(520) 628-6345

ARIZONA REGISTRAR of CONTRACTORS

Douglas A. Ducey, Governor   *Jeff Fleetham, Director*

NOTICE OF QUALIFYING PARTY DISASSOCIATION

MAIL TO: P.O. Box 6688 Phoenix, AZ 85005-6688

Pursuant to A.R.S. § 32-1167(A) when a qualifying party for a license disassociates from the licensed entity, **both** the licensee and the qualifying party must give written notice to the Registrar of Contractors within fifteen (15) days after such disassociation. If a qualifying party is a partner, corporate officer, or member the business entity **must** also submit an amended Articles of Incorporation, Amended LLC Agreement or Amended Partnership Agreement reflecting the change. The effective date of the disassociation is the date the disassociation is received by Registrar of Contractors.

The licensee has sixty (60) days from the date of the disassociation to have another qualified person placed on the license. If the licensee fails to have another person qualified within sixty (60) days, the license will be automatically suspended until another qualified person is placed on the license. (A.R.S. § 32-1167(B))

Please type or print in ink:

_____   _____
Business Name   Business Email

#_____ #_____ #_____ #_____
License Number(s)

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. These purposes and duties include 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. § 32-1155(A) establishes a two-year period for the filing of complaints, these purposes and duties continue for up to two years after I disassociate from this license

_____   _____
Name of Corporate Officer, Member, Partner   Name of Qualifying Party

_____   _____
Signature of Corporate Officer, Member, Partner   Signature of Qualifying Party