

APPLICATION FOR QUALIFYING PARTY

Qualifying Party: *the person designated by the applicant/licensee to take the exam(s) or to hold the classification(s)*

- You must submit a Qualifying Party Application for **EACH** qualifying party.
- Click [HERE](#) for eligibility requirements for Qualifying Party.

A. QUALIFYING PARTY ELIGIBILITY

Qualifying Party must meet one of the following to be eligible to represent the applicant/licensee: *(Select box below that applies to you.)*

	Sole Proprietor <i>(Individual)</i>
	Spouse of Sole Proprietor <i>(Individual)</i>
	Incorporator, Stockholder or Officer <i>(Corporation)</i>
	Partner <i>(Partnership)</i>
	Member or Manager <i>(LLC)</i>
	Employee <i>(has been in full-time employment for 120 consecutive days immediately preceding completing this form)</i>

B. QUALIFYING PARTY INFORMATION

NOTE: All correspondence and examination approval letters will be **EMAILED** to the email address below.

First	(PRINT)	Middle	(PRINT)	Last	(PRINT)	Jr/Sr, etc
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Name of Company

Social Security Number (of Qualify Party)	Date of Birth (mm/dd/yyyy)
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Mailing Address: (Street or P.O. Box)	City	State	ZIP
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Work Number	Cell or Home Number	Fax Number
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Email address (of Qualifying Party) **MUST BE PROVIDED**

C. CLASSIFICATION INFORMATION

For which classification(s) will you be representing of the company as a qualifying party? (List Below)

D. BUSINESS AND LAW

Yes	No	Will you be representing the applicant/licensee for the Louisiana Business and Law course?
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- Each applicant/licensee must have at least one qualifying party for the Louisiana Business and Law. (no exceptions)
- The Louisiana Business and Law course is an online course. *It is not an exam.*

E. QUALIFYING PARTY LEGAL QUESTIONS

1.	Yes	No	Do you have an outstanding notice of child support delinquency which has not been resolved?
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If **YES**, you will not be eligible as a qualifying party until the delinquency is resolved.

Note: "Resolved" means you are now current with your child support payments or have entered into a payment plan, which is also current.

2.	Yes	No	Have you been convicted of a felony or a misdemeanor other than violation of traffic laws?
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If **YES**, please explain below:

3.	Yes	No	Are there now any liens, judgments, or attachments pending or recorded against you, or against any firm in which you had interest at the time such indebtedness was created, or against any property involved under any of your contracts arising out of your previous operations in ANY state?
If YES , provide a certificate of release or a payment plan, along with a statement from the legal agency showing that the plan is current.			

F. QUALIFYING PARTY AFFIDAVIT

- Qualifying Party must read and agree to each statement listed below. (#7 must be agreed to only if an Employee)
- Qualifying Party must sign below and have signature notarized.

1. I certify under penalty of perjury under the laws of the State of Louisiana that all statements, answers and representations on this form are true and accurate, and I acknowledge that any purposeful false information submitted on behalf of myself and verified by this signature is cause to have license denied or revoked by the Louisiana State Licensing Board for Contractors.

2. I understand that I must notify LSLBC in writing if I leave the company's employment or if I am no longer affiliated with the company listed on this application as the qualifying party.

3. I understand that **IF** I am a qualifying party for a classification(s) that requires a current, active credential, such as a certification or license, from an outside agency or organization then I understand that the credential must remain current and active with that outside agency or organization while representing the classification(s) on the active contractor's license with LSLBC.

4. I understand that the licensing board will use the mailing address and/or email address provided as official means of communication. I also acknowledge and understand that I will monitor the email address provided for official correspondence from LSLBC.

5. I understand that any changes to my mailing address and/or email address must be updated with LSLBC within 15 days.

6. I hereby agree to comply with all Contractor Licensing Laws (La. Revised Statutes 37:2150-2165) and Contractor Rules and Regulations (Title 46 of the Professional and Occupations Standards) Part XXIX, Contractors, Chapters 1 – 7. A copy of this document can be viewed and downloaded from our website at: http://www.lslbc.louisiana.gov/wp-content/uploads/blue_book.pdf. I understand that the Louisiana State Licensing Board for Contractors may take action to issue fines and penalties, and/or suspend or revoke the qualifying party status for violation of the laws and Rules and Regulations governing the licensing of contractors in Louisiana.

7. I understand that LSLBC will be performing a financial review on the qualifying party listed on this form. I understand that if LSLBC staff finds an outstanding lien and/or judgment attached to the qualifying party listed on this form, I will provide a certificate of release or a payment plan, along with a statement from the legal agency showing that the plan is current. I also understand that I will be required to adhere to the payment plan agreement while being an active qualifying party with this board. Failure to do so may result in the suspension of the license(s) I represent.

If Qualifying Party is an Employee, Statement #8 must be agreed to, and Employer must sign below.

8. I certify under penalty of perjury under the laws of the State of Louisiana that the qualifying party listed below is an employee of said applicant and has been in full-time employment for 120 consecutive days, and I acknowledge that any purposeful false information submitted on behalf of myself and verified by the signature below is cause to have qualifying party application denied or the license and qualifying party status revoked by the Louisiana State Licensing Board for Contractors. The employer shall be prepared to provide evidence of eligibility by furnishing evidence satisfactory to the board of employee's employment with the licensee or party seeking a license for the four preceding months if so requested by the Board.

 Signature of Employer - Owner, Officer or Authorized Representative
**Employer's signature is required if qualifying party is an employee.*

 Print Name of Qualifying Party

 Signature of Qualifying Party

 Date