



Alabama Department of Labor
 Inspections Division
 649 Monroe Street
 Montgomery, Alabama 36131
 Office 334-956-7404 Fax 334-956-7405

Kay Ivey
 Governor

Fitzgerald Washington
 Secretary of Labor

Application for Elevator Contractor's License

Check appropriate box:

Sole proprietor [] Partnership [] Domestic Corporation [] Other Corporation []

If a sole proprietor, the name, residence address, and business address of the applicant. If a partnership, the name and residence and business address of each partner. If a domestic corporation, the name, and business address of the corporation and the name and residence address of principal officer of the corporation. If a corporation other than a domestic corporation, the name, and address of a local agent who shall be authorized to accept service of process and official notices. Provide all information on additional sheets and attach to this application if necessary.

Name (if applicable) _____

Business Name _____

Residence Address (if applicable) _____

City _____ State _____ Zip _____

Business Address _____

City _____ State _____ Zip _____

New License [] Renewal [] Previous License Number _____

Principal Officer (if applicable) _____

Local Agent (if applicable) _____

Local Agent address (if applicable) _____

City _____ State _____ Zip _____

Applicant Phone Number _____ Email _____

Applicant Social Security # (required by Federal/State law for new license, not required for renewal) _____

Are you a US Citizen? Yes ___ (If Yes, provide a copy of driver's license or other acceptable form of identification.) No ___ (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, 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 dollars (\$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 or \$200.00 for a renewal, payable to the Alabama Department of Labor.

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

Approximate numbers of persons if any to be employed by applicant. _____

Criminal record of convictions, if any as verified by the Department of Public Safety:

Signature _____

Date _____