Alabama Department of Labor
Inspections Division
649 Monroe Street
Montgomery, Alabama 36131
Office 334-242-3632 Fax 334-353-4528

Robert Bentley
Governor

G. Thomas Surtees
Commissioner

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) _____
Business Address _____
New License [ ] Renewal [ ] Previous License Number _____
Principal Officer (if applicable) _____
Local Agent (if applicable) _____
Local Agent address (if applicable) _____
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____No____ If no, provide appropriate documentation from the US Government with your application that you are legally present in the United States.

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** _____