

To renew on-line, go to www.nclclb.com, select "Licensing", then "Individual License Renewal". To renew by mail, mail this form and fee to NCLCLB, PO Box 20875, Raleigh NC 27619.

Individual License Number:	Name:				
		(First Name)	(Middle Name)	(Last Name)	(Suffix)
Note below CHANGES only to your contact in	formation. If y	our contact inform	nation has not chang	ed, leave this section	n blank.
Preferred Mailing Address:	Home	_Business			
Note: Preferred mailing address is	used for mail	ings and is list	ed on website lic	ensee directory.	
Home Mailing Address		Bu	siness Name		
Home City, State, Zip		Bu	siness Mailing Addro	ess	
Home County		Bu	siness City, State, Zi	р	
Home Phone # ( )		Bu	siness County		
Cell Phone # ( )			siness phone # (	)	
Home Email		Bu	siness Email		

## For this renewal year only:

CE reporting is not required this year. Temporary rule (21 NCAC 28B .0406, effective 4/20/2020) was implemented and adopted by the NCLCL Board due to the COVID-19 pandemic. This temporary rule extends the CE requirement to next licensing year ending July 31, 2021. Any CE credits accrued from August 1, 2019 - July 31, 2020 will be applied to the next licensing year August 1, 2020 – July 31, 2021. Therefore, you will need a total of 7 credits (including 3 landscape/technical and 2 business) for the 2-year period between August 1, 2019 and July 31, 2021.

## By signing this form, I certify the information provided above is true and accurate, and:

- 1. My \$10,000 NCLC surety compliance bond or irrevocable letter of credit remains continuously in force. (G.S.89D-16(a)(4))
- → 2. I understand CE reporting is not required with this renewal and will be reported with next year's renewal. Further, I understand that I will keep in my personal records all Proof of Attendance forms for at least 2 years following the renewal date the CEs were reported. (Rule 21 NCAC 28B .0403)
  - 3. I have provided all changes to my current mailing address, phone, email and business information. (Rule 21 NCAC 28B.0204)
  - 4. I have provided documentation regarding criminal convictions, if any, occurring since previous licensure. (Rule 21 NCAC 28B.0301)
- → 5. **REQUIRED VERIFICATION** (you must check a box): On behalf of the applicant/licensee, I certify that I have read and understand the "public notice statement" maintained by the N.C. Industrial Commission, Employee Classification Section on their website. Further, the applicant/licensee has/has not been investigated for employee misclassification within the past twelve (12) months.

## → Signature of Licensee

**Today's Date** 

Pursuant to NCGS 143-765, you are required to certify by signature that you have read and understand the statements above. IF YOU FAIL TO CERTIFY as instructed, the Board CANNOT approve your application for a license. Office use:

Payment Amount: \$60.00 (Add \$125.00 reinstatement and late fee if postmarked after 8/1/20	20)
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Check payable to NCLCLB or Credit card (Visa, MasterCard or AMEX)

Postmark
Date Rec'd
Fee
Date Pd
Ck #

Name on	Card	

Card Mailing Address

Credit Card Number

Expiration Date CVV code

Cardholder Signature

IMPORTANT: Did you sign this form and check a box on question 5? Incomplete forms will not be processed by law. Form IR01 04/27/2020