

NC Landscape Contractors' Licensing Board PO Box 20875, Raleigh, NC 27619 **Individual License Renewal Application**

August 1, 2024 – July 31, 2025

Renew on-line easily and instantly using the NCLCLB Licensee Web Portal:

- Go to www.nclclb.com. Select "Licensing", then "Individual Licensing Renewal". Click on "Renew Here".
- Login with your unique user ID and password, which have been mailed and emailed to you.
- The licensee portal allows you to view your CE credits that have been reported by course providers. If the CE requirement has been recorded as met, you'll be able to proceed with your renewal.
- After you have successfully renewed, you can instantly see your updated license renewal status.

If renewing by mail:

Individual License Number:

Preferred Mailing City, State, Zin

Preferred Mailing Address

Complete this form and mail with fee to NCLCLB, PO Box 20875, Raleigh NC 27619.

Name:

- Attach copies of your Proof of Attendance forms. Keep the originals for your records. See CE Reporting below.
- CE reporting: You can check your CE credits on the NCLCLB web portal and easily renew on-line. If the CE requirement shows incomplete, contact the course provider who is required to report attendance to the Board. If renewing by mail, attach your Proof of CE Attendance forms. If you do not have your CE forms, contact the course provider.

(First Name)

Note below CHANGES only to your contact information. If your contact information has not changed, leave this section blank.

(Middle Name)

Business Name

(Last Name)

Business Location Address (appears on NCLCLB website)

(Suffix)

| IMF | PORTANT: Did you check a box on C | Question 5 and sign this form? Inco | mplete forms will not be processed by law | | |
|---|---|-------------------------------------|---|-------------|--|
| | t Card Number | Expiration Date CVV code Cardh | | | |
| | | | | Ck # | |
| Name on Card Card Mailing A | | Card Mailing Address | ddress | | |
| | | | | Fee Date Pd | |
| ☐ Check payable to NCLCLB or ☐ Credit card (Visa, MasterCard or AMEX) | | | Date Rec'd | | |
| Payment Amount: \$100.00 (non-refundable) If postmarked after 8/1/2024: \$225.00 (\$100 Reinstatement, \$100 License Fee, \$25.00 Late Fee) | | | | Postmark | |
| FAIL TO CERTIFY as instructed, the Board CANNOT approve your application. | | | Office use: | | |
| Pursuant to NCGS 143-765, you are required to certify by signature that you have read and understand the statements above. IF YOU | | | | | |
| Sior | nature of Licensee | | Today's Date | | |
| | Further, the applicant/licensee \square has/ \square has not been investigated for employee misclassification within the past twelve (12) months. | | | | |
| the "public notice statement" maintained by the N.C. Industrial Commission, Employee Classification Section on their website. | | | | | |
| I have provided documentation regarding criminal convictions, if any, occurring since previous licensure. (Rule 21 NCAC 28B.0301) REQUIRED VERIFICATION (you must check a box): On behalf of the applicant/licensee, I certify that I have read and understand | | | | | |
| 3. I have provided all changes to my current mailing address, phone, email and business information. (Rule 21 NCAC 28B.0204) | | | | | |
| 2. I have personally attended or taken the Continuing Education (CE) credits for my license renewal. (Rule 21 NCAC 28B.0402 (h)) | | | | | |
| 1. My \$10,000 NCLC surety compliance bond or irrevocable letter of credit remains continuously in force. (G.S.89D-16(a)(4)) | | | | | |
| By s | signing this form, I certify the | information provided above i | s true and accurate, and: | | |
| | Is this preferred address (above) also Yes No | your home address? | | | |
| | | | | | |
| | Preferred Email | | Business Email | | |
| | Preferred Phone # () Cell Phone # () | | Business Phone # () | | |
| | | | Business County | | |
| | Preferred Mailing County | | Business City, State, Zip | | |
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