

Minnesota Department of Labor and Industry  
Construction Codes and Licensing Division  
Licensing and Certification Services  
443 Lafayette Road North  
St. Paul, MN 55155



Mailing Address:  
PO Box 64217  
St. Paul, MN 55164-0217

## Personal License, Registration, & Certification Change of Address

Email: [dli.license@state.mn.us](mailto:dli.license@state.mn.us)  
Website: [www.dli.mn.gov](http://www.dli.mn.gov)  
Phone: (651) 284-5034

**Make a copy of completed form for your records**

The year of birth and last 4 digits of your Social Security Number are requested as verification of your identity to ensure only the licensee is updating their license information. All information provided on this form, except Social Security Number, is considered public pursuant to Minnesota Statutes, Chapter 13.

### License Information – Must provide to change an address and/or renew license, registration, or certification

LICENSE TYPE	LICENSE/REGISTRATION/CERTIFICATE #	EXPIRATION DATE	
DATE OF BIRTH	SOCIAL SECURITY NUMBER (last 4 digits)	PHONE NUMBER	
LAST NAME	FIRST NAME	MIDDLE INITIAL	

### Current Address Information

STREET ADDRESS (PO Box must include street address)

CITY STATE ZIP CODE

### Former Address Information – Must provide past address information before address may be changed

FORMER ADDRESS (PO Box must include street address)

CITY STATE ZIP CODE

**Certification: I certify that I hold this license, registration, or certificate and that the information provided on this form is correct and accurate.**

SIGNATURE ( <u>mandatory</u> )	DATE SIGNED
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This material can be made available in different forms, such as large print, Braille or on audio.

Personal License, Registration, & Certification Change of Address 3.23.2023