Minnesota Department of Labor and Industry
Construction Codes and Licensing Division
Licensing / Residential
443 Lafayette Road No.
St. Paul, MN 55155

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DEPARTMENT OF LABOR AND INDUSTRY

Residential Contractor Examination Application

PAID APPLICATION FEE IS NONREFUNDABLE
CASH IS NOT ACCEPTED BY MAIL OR WALK-IN

Application Fee = $50.00

SELECT THE EXAM YOU ARE APPLYING FOR:

- ☐ Residential Building Contractor
- ☐ Residential Remodeler
- ☐ Residential Roofer
- ☐ Manufactured Home Installer

Is this a license exam retest? ☐ **Yes** ☐ **No**

SPACE IN BOX FOR OFFICE USE ONLY

Account Number 632422	**STK** B42RCLIC
Check Number	**Amount Paid**
☐ **PCK** ☐ **CCK** ☐ **MO**	**DLI Deposit Date**

NOTICE: Pursuant to Minnesota Statute § 604.113, checks returned for nonpayment will be charged a $30 service charge and may subject the issuer to additional civil penalties.

PRINT clearly IN INK OR TYPE
MAKE A COPY OF THIS FORM FOR YOUR RECORDS

The information you as an individual provide in this application will be used by Department of Labor & Industry staff members to determine if you meet the Department's registration requirements. Minnesota Statute § 270C.72, Subd. 4, requires you to provide your social security number on this application. The other information is being requested for purposes of processing your application. With the exception of your Social Security, you are not legally required to supply the requested data on this application; however, failure to provide the requested information may delay the processing of your application or result in the denial of the same. Except for your name and designated address, the information you provide on this application is private data while the application is pending. Disclosure of this information to others may occur as authorized or required by law, including but not limited to the Attorney General's Office, the Department of Revenue, the Department of Human Services, upon court order, and/or for the purpose of verification and investigation. Once you are registered, the information you provide, other than your Social Security Number and non-designated address, becomes public data and may be released to anyone upon request.

Avoid processing delays by submitting your application online at https://secure.doli.state.mn.us/license/intro.aspx

SOCIAL SECURITY NUMBER	**DATE OF BIRTH (MM/DD/YYYY)**	**AREA CODE & PHONE NUMBER**	**E-MAIL ADDRESS**
LEGAL LAST NAME	**SUFFIX (JR, SR, II, III)**	**LEGAL FIRST NAME**	**LEGAL MIDDLE NAME**
RESIDENTIAL ADDRESS		**PUBLIC MAILING ADDRESS** (if different from residential address)	
CITY NAME	**STATE** / **ZIP CODE**	**CITY NAME**	**STATE** / **ZIP CODE**

Is the Residential address above a non-designated (private) address? ☐ Yes ☐ No

If **yes**, then you must provide a designated (Public) mailing address.

APPLICANT SIGNATURE	**DATE SIGNED (MM/DD/YYYY)**

This material can be made available in different forms, such as large print, braille or on an audio.