

## **Designated Qualifying Representative (DQR) Change Form** **Instructions**

**NOTE: If DQR change is to become effective January 1<sup>st</sup>,  
contact the Licensure Division at 1-800-304-0853 for instructions.**

Per your request, please find the enclosed Designated Qualifying Representative Change (DQR) form. Please complete this form (2 pages) and include:

1. If **corporation**, a current listing of officers from your minutes or bylaws or a signed officer listing on company letterhead.  
If an **limited liability company (LLC)**, an amendment to your Articles showing that the new DQR is a member (if a member-run LLC) or a manager (if a manager-run LLC).  
If a **partnership**, a current signed listing of partners.
2. Your current original Home Builders licensure certificate and card so that we may void and reprint license with the new DQR's name.
3. Copy of the new DQR's passing test score for the Alabama Home Builders exam OR a copy of the new DQR's existing home builders license.

Mailed completed, signed and notarized Designated Qualifying Representative Change form along with the above requested documents to: Home Builders Licensure Board, 445 Herron St., Montgomery, AL 36130-3605.

Contact our office if you have questions at 1-800-304-0853.

# DESIGNATED QUALIFYING REPRESENTATIVE CHANGE FORM

445 Herron Street / Montgomery, Alabama 36130-3605 / Telephone (334) 242-2230 / Facsimile (334) 263-1397

You **MUST** attach amended Articles of Incorporation which have been filed with the probate judge, showing officers' names (for corporations), amended Articles of Organization showing members' names (for LLC) or amended Partnership Agreement listing partners' names (for Partnership).

You **MUST** return your current original Home Builders License Certificate and Card with this form.

## SECTION 1:

File No.: \_\_\_\_\_ License No.: \_\_\_\_\_

Please designate appropriate business form:  Corporation     Partnership     Limited Partnership     LLC

Business Name \_\_\_\_\_

## SECTION 2:

Name of **NEW** Designated Qualifying Representative \_\_\_\_\_  
(Must be an Officer, General Partner or Member)

Title \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(Disclosure mandatory under the Alabama Child Support Reform Act of 1997, Act 97-447, Ala. Code § 30-3-194 (1997 Cum. Supp.) to be used for the purposes described therein.)

Address \_\_\_\_\_ Years with Firm \_\_\_\_\_

Does the qualifying representative currently hold an individual home builders license or serve as a qualifying representative of a corporation, partnership, or limited liability company licensed by this agency? .....  Yes     No

If Yes, list name \_\_\_\_\_ and file number \_\_\_\_\_

**You must provide the following information for other partners, officers or members.**

Name \_\_\_\_\_ Social Security# \_\_\_\_\_ Title \_\_\_\_\_  
(Disclosure Voluntary\*)  
Address \_\_\_\_\_ Years with Firm \_\_\_\_\_

Name \_\_\_\_\_ Social Security# \_\_\_\_\_ Title \_\_\_\_\_  
(Disclosure Voluntary\*)  
Address \_\_\_\_\_ Years with Firm \_\_\_\_\_

Name \_\_\_\_\_ Social Security# \_\_\_\_\_ Title \_\_\_\_\_  
(Disclosure Voluntary\*)  
Address \_\_\_\_\_ Years with Firm \_\_\_\_\_

Name \_\_\_\_\_ Social Security# \_\_\_\_\_ Title \_\_\_\_\_  
(Disclosure Voluntary\*)  
Address \_\_\_\_\_ Years with Firm \_\_\_\_\_

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• • • • • **REQUIRED** • • • • •  
**BOTH SECTIONS 3 AND 4 MUST BE SIGNED AND NOTARIZED.**

**SECTION 3: OATH AND RELEASE FOR DESIGNATED QUALIFYING REPRESENTATIVE (DQR)**

I solemnly swear or affirm that I am the person referred to in this application; that the statements made herein and on the attachments hereto are accurate, complete, and true to the best of my knowledge; and further, that if the Home Builders Licensure Board recognizes me as a qualifying representative, I shall abide by all laws relating to residential home builders and the rules adopted by the Board.

I hereby authorize any individual, company, or institution with whom the applicant has been associated to release to the Home Builders Licensure Board all information and records as are necessary to verify or contradict the information provided in this application.

\_\_\_\_\_  
Printed Name of Designated Qualifying Representative {DQR} (Must be a General Partner, Officer or Member)

\_\_\_\_\_  
Signature of Designated Qualifying Representative {DQR} (Must be a General Partner, Officer or Member)

Its: \_\_\_\_\_  
(Position Held)

County of \_\_\_\_\_ )

State of \_\_\_\_\_ )

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_  
(Month) (Year)

(Notarial Seal)

Signature – Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**SECTION 4: OATH AND RELEASE FOR CORPORATIONS, PARTNERSHIPS, OR LIMITED LIABILITY COMPANIES (L.L.C.)**

I solemnly swear or affirm that I am authorized to execute this application on behalf of the applicant; that I have actual knowledge of the statements made herein and on the attachments hereto and that such statements are accurate, complete, and true to the best of my knowledge; and further, that if the applicant is granted a license by the Home Builders Licensure Board, I shall use my best efforts to ensure that the applicant abides by all laws relating to residential home builders and the rules adopted by the Board.

I hereby authorize any individual, company, or institution with whom the applicant has been associated to release to the Home Builders Licensure Board all information and records as are necessary to verify or contradict the information provided in this application.

By: \_\_\_\_\_  
Printed Name of Authorized General Partner, Officer, or Member

By: \_\_\_\_\_  
Signature of Authorized General Partner, Officer, or Member

Its: \_\_\_\_\_  
(Position Held)

County of \_\_\_\_\_ )

State of \_\_\_\_\_ )

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_  
(Month) (Year)

(Notarial Seal)

Signature – Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**BOTH SECTIONS 3 AND 4 MUST BE SIGNED AND NOTARIZED.**