



Contractor/Business License Application

Mail application with payment to:

Department of Consumer and Business Services
Building Codes Division • 1535 Edgewater NW, Salem, OR
 Mailing address: P.O. Box 14470, Salem, OR 97309-0404
 503-373-1268 • Fax: 503-378-2322
 Web: bcd.oregon.gov

DCBS Fiscal Services
 P.O. Box 14610
 Salem, OR 97309-0445

Please review requirements and complete steps before submitting your application. Application fees are nonrefundable.

STEP 1 APPLICANT INFORMATION			
Construction Contractors Board license no.:		Expires:	
Name that appears on CCB license:		Phone: - -	
Owner/corporate officer (first and last name):		Cell phone: - -	
Company name/DBA/ABN:		Fax: - -	
Address/P.O. Box:		E-mail:	
City:	County:	State:	ZIP:
Applicant is: <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Ltd. liability company			
STEP 2 LICENSE TYPES			
You may choose single or combination license(s).		COMBINATION LICENSES	
ELECTRICAL LICENSES	PCA FEE		PCA FEE
<input type="checkbox"/> Electrical contractor (C)	70111 \$375	<input type="checkbox"/> Plumbing and boiler business (BP)	77711 \$645
<input type="checkbox"/> Limited energy contractor (CLE)	70111 \$375	<input type="checkbox"/> Plumbing and boiler business and restricted energy contractor (PBR)	77712 \$1020
<input type="checkbox"/> Limited sign contractor (CLS)	70111 \$375	<input type="checkbox"/> Plumbing and ltd. maintenance specialty contractor (PM)	77713 \$225
<input type="checkbox"/> Limited renewable energy contractor (CLR)	70111 \$375	<input type="checkbox"/> Plumbing and ltd. pump installation contractor (PP)	77714 \$225
<input type="checkbox"/> Restricted energy contractor (CRE)	70111 \$375	<input type="checkbox"/> Elevator electrical and elevator mechanical contractor (EM)	77715 \$1035
<input type="checkbox"/> Limited maintenance specialty contractor (LMS)	70111 \$75	<input type="checkbox"/> Plumbing and boiler business and ltd. maintenance specialty contractor HVAC/R (PBH)	77716 \$720
<input type="checkbox"/> Limited maintenance specialty contractor HVAC/R (LHR)	70111 \$75	<input type="checkbox"/> Boiler business and ltd. maintenance specialty contractor (BH)	77717 \$570
<input type="checkbox"/> Limited pump installation specialty contractor (CPI)	70111 \$75	<input type="checkbox"/> Plumbing and boiler business and electrical contractor (PBE)	77718 \$1020
PLUMBING AND BOILER LICENSES		ELEVATOR LICENSES	
<input type="checkbox"/> Plumbing business (PB)	70611 \$150	<input type="checkbox"/> Elevator contractor electrical (EC)	70111 \$450
<input type="checkbox"/> Boiler/pressure vessel business (BB)	70311 \$495	<input type="checkbox"/> Elevator contractor mechanical (ECM)	70211 \$585
STEP 3 METHOD OF PAYMENT			
Secure fax for credit card payments: 503-947-2333		Make check or money order payable to Department of Consumer and Business Services.	
If paying by credit card, applicant must sign credit card information box.		Do <i>not</i> send cash.	

<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover Phone: _____	
Credit card number _____	Expiration date _____
Name of cardholder as shown on credit card _____	
Cardholder signature _____	\$ _____
	Amount

Fiscal use only: 12104/0600



STEP 4 PREVIOUS LICENSES

If you hold, or have held, a license with the State of Oregon Building Codes Division, list your license number(s): _____ and business name(s): _____.

STEP 5A LICENSE PREREQUISITE: DESIGNATE SIGNING SUPERVISOR

NOTE: Boiler/pressure vessel businesses (BB) and plumbing businesses (PB) skip to Step 6.

Different contractor licenses have different options for who can serve as a “qualified signing supervisor.” Use this chart to determine the options that apply to your license.

Contractor Type	Qualified Signing Supervisor							“Qualified person” (QP) must submit verification form 2888-C. *See instructions for more information.
	General supervising electrician (S)	General journeyman electrician (J)	Ltd. energy class A (LEA)	Ltd. energy class B (LEB)	Ltd. renewable energy technician (LRT)	Ltd. journeyman sign electrician (SIG)	Ltd. journeyman elevator electrician (E)	
(C) Electrical contractor	X							
(CLE) Ltd. energy contractor	X	X	X	X				
(CLS) Ltd. sign contractor	X	X				X		
(CLR) Ltd. renewable energy contractor	X	X			X			
(EC) Elevator contractor electrical	X						X	
(CRE) Restricted energy contractor	X	X	X	X				X
(LMS) Ltd. maintenance specialty contractor	X	X						X
(LHR) Ltd. maintenance specialty contractor HVAC/R	X	X	X	X				X
(CPI) Ltd. pump installation specialty contractor	X	X						X

Print name of designated signing supervisor: _____

Signing supervisor signature: _____ License number or “QP”: _____

STEP 5B LICENSE PREREQUISITE — ADDITIONAL REQUIREMENTS

The following contractor types are required to submit a list of employees on company letterhead:

- (CRE) Restricted energy contractor
- (LMS) Ltd. maintenance specialty contractor
- (LHR) Ltd. maintenance specialty contractor HVAC/R
- (ECM) Elevator contractor mechanical (List for ECM must include license numbers of all employees).
ECM must *also* submit a certified copy of a certificate of insurance, or its equivalent, from the company’s insurance carrier as proof the applying company is insured as an elevator contractor.

STEP 6 OWNER/CORPORATE OFFICER SIGNATURE (must be listed in STEP 1 as owner/corporate officer)

I hereby certify the information on this application is true, correct, and complete. I understand that incorrect statements or omission of material facts may result in denial of this application.

Print owner/corporate officer name: _____

Owner/corporate officer signature: _____ Date: _____

