

IMPORTANT NOTICE: Completion of this form is necessary for consideration for licensure under 225 ILCS 335/1 et. seq. (Illinois Compiled Statutes). Disclosure of this information is REQUIRED. Failure to comply will result in this form not being processed.

ROOFING CONTRACTOR QUALIFYING PARTY

INSTRUCTIONS

*In order for your application to be processed,
ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED
with the application and required fee unless otherwise directed in the instructions.*

Applicants applying for a roofing contractor license shall be required to designate a qualifying party who must take and pass the state unlimited or limited examination.

If at any time a licensee allows his/her license to lapse, or the designated qualifying party terminates or is terminated, or his or her status as qualifying party of a licensee is terminated, the licensee will be required to designate a qualifying party who has taken and passed the examination.

Department of Financial and Professional Regulation
Division of Professional Regulation
320 West Washington Street, 3rd Floor
Springfield, Illinois 62786

This notice, as well as other forms required for roofer contractors, can be downloaded from the IDFPF Web site at:
www.idfpr.illinois.gov

QUALIFYING PARTY INFORMATION

1. NAME OF QUALIFYING PARTY	2. SOCIAL SECURITY NUMBER OR ITIN
3. ADDRESS OF QUALIFYING PARTY	4. TELEPHONE NUMBER OF QUALIFYING PARTY

Signature of Qualifying Party: _____

ROOFING CONTRACTOR INFORMATION

1. NAME OF ROOFING BUSINESS	2. LICENSE NUMBER 104 - _____
3. NAME AND ADDRESS OF BUSINESS HEADQUARTERS (Street, City, State Zip Code)	4. BUSINESS TELEPHONE NUMBER (Include Area Code)
	5. FAX NUMBER (Include Area Code)
	6. E-MAIL ADDRESS:

Date to **begin** as Qualifying Party: _____

Signature of Qualifying Party: _____

Signature of Person in Charge of Roofing Business: _____