

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS



Department of Administration
 Division of Capital Asset Management & Maintenance
CONTRACTORS' REGISTRATION and LICENSING BOARD
 One Capitol Hill
 Providence, RI 02908-5859

Office (401)222-1270
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 www.crb.ri.gov

CONTRACTORS' REGISTRATION APPLICATION

1.)	A. <input type="checkbox"/> INDIVIDUAL PROPRIETOR REGISTRATION FEE \$200.00 2 YEARS	B. <input type="checkbox"/> PARTNERSHIP REGISTRATION FEE \$200.00 2 YEARS * ADDITIONAL CARDS ISSUED TO PARTNERS \$20.00 EACH	C. <input type="checkbox"/> CORPORATION OR LLC REGISTRATION FEE \$200.00 2 YEARS * ADDITIONAL CARDS ISSUED TO OTHER OFFICERS \$20.00 EACH	
PROOF OF RHODE ISLAND STATE RESIDENCY IS REQUIRED 3.2(7)				
ALL REGISTRATIONS EXPIRE ON THE FIRST OF THE MONTH. PRINT/TYPE YOUR NAME AND BUSINESS NAME EXACTLY AS THEY WILL APPEAR ON THE REGISTRATION.				
Driver's License State _____ No. _____ Registration No. _____ <div style="text-align:right;">(OFFICE USE ONLY)</div> Name: _____ Date of Birth _____ <div style="margin-left: 20px;">(PRINCIPAL RESPONSIBLE)</div> Address (P.O. BOXES NOT ACCEPTABLE) _____ E-Mail _____ _____ Home Phone Number _____ Business Phone Number _____ Cell Phone Number _____ _____ Business Name _____ Web Address _____ _____ Mailing Address of Business _____ City _____ State _____ Zip Code _____ _____ Authorized Representative _____ FEIN # _____				
2.)	PROVIDE INFORMATION OF ALL PARTNERS OR ADDITIONAL CARD HOLDERS BELOW.			
	NAME(S)	ADDRESS	DATE OF BIRTH	DRIVER'S LICENSE STATE & NO.
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
CORPORATIONS OR LLC MUST BE FILED WITH THE RHODE ISLAND SECRETARY OF STATE CORPORATION DIVISION PRIOR TO FILING WITH THE CONTRACTORS' REGISTRATION AND LICENSING BOARD. COPY OF FILED CORPORATE PAPERS REQUIRED. CORPORATION ISSUANCE DATE _____				
3.)	<p style="color:red; font-weight:bold;">No registration shall be issued to a nonresident contractor until he or she has filed with the Board a power of attorney constituting and appointing a registered agent (an attorney whose office is located within the boundaries of the State of R.I. or a registered agent listed with the R.I. Secretary of State Office) upon whom all processes in any action or legal proceeding against him or her may be served, and in the power of attorney agrees that any lawful process against him or her which may be served upon his or her registered agent is of the same force and validity as if served on the nonresident contractor, and that the force continues irrevocably in force until such time as the Board has been duly notified in writing of any change.</p> AGENT OF SERVICE NAME: _____ TELEPHONE NO. _____ ADDRESS _____ CITY _____ ZIP CODE _____			
4.)	REQUIRED AFFIDAVIT ATTACHED R.I. GEN.LAW 5-65-5(f). (SIGNED BY PRINCIPAL AND NOTORIZED)		YES	NO

