

## **INSTALLER CLASSIFICATIONS: FEE & BOND REQUIREMENTS**

All licenses expire at 12:01 a.m., one year from the date of issuance, and must be renewed to remain active. Renewal forms are mailed from this Office, as a courtesy, by the 15th of the previous month. It is the responsibility of the licensee, however, to secure such renewal forms because the Office does not assume responsibility for delivery. Pursuant to Arizona Revised Statutes, §41-2177, the licensee must have a valid bond on file with the Office to qualify for renewal. The same statute provides that a license shall be renewed before the anniversary of the issuance date or a **PENALTY FEE** will be assessed.

**Class: I-10C**  
**Fee: \$441.00**  
**Bond : \$2,500.00**  
**SCOPE:**

### **General Installer of Manufactured Homes, Mobile Homes or Residential, Single Family, Factory-Built Buildings**

Install manufactured homes, mobile homes, or residential, single family factory-built buildings on foundation systems. Install ground anchors and tie down manufactured homes or mobile homes. Connect water, sanitary waste, gas and electrical systems of all amperages to the proper on-site utility terminals provided by others. Install evaporative coolers and cooler systems on manufactured homes, mobile homes or residential, single family factory-built buildings. Install roof jack to cooler ducts. Install duct work. Provide electrical service and controls to cooler from nearest supply source. Provide water to the cooler from the nearest fresh water source. Accomplish work as indicated under manufacturer's warranty for the unit.

**Class: I-10D**  
**Fee: \$441.00**  
**Bond : \$1,000.00**  
**SCOPE:**

### **Installer of Accessory Structures Attached to Manufactured Homes, Mobile Homes or Residential, Single Family, Factory-Built Buildings**

Install prefabricated accessory structure units. On-site construction of accessory structures. Placing of concrete footings or slabs for accessory structures. Contract with properly licensed contractors for the installation of plumbing, electrical, and mechanical equipment as part of an accessory structure and subcontract all or any part of the items within this scope to properly licensed installers/contractors.

**Class: I-10G**  
**Fee: \$756.00**  
**Bond: \$5,000.00**  
**SCOPE:**

### **Master Installer of Manufactured Homes, Mobile Homes or Residential, Single-Family, Factory-Built Buildings**

Accomplish work as described in license scopes I-10C and I-10D. Install evaporative cooling units and refrigeration air conditioning units. Subcontract with properly licensed installers/contractors.

PLEASE READ THIS!!

Enclosed is the licensing packet you have requested. The following is provided for your information:

**DEALER, BROKER & INSTALLER APPLICANTS:**

Testing is done Wednesdays at 9:00 a.m., **by appointment only**, at 1100 W. Washington Av., Ste. 100, Phoenix, Arizona. We must receive your application, fee and refund policy form at least three days prior to your desired testing date in order to schedule you for the examination. You may not submit an application and take the exam on the same day. **Exams are scheduled on a first come, first serve basis.** You must call the Office to schedule your examination in advance.

**MANUFACTURER APPLICANTS:**

Each manufacturer's plant must be certified. You may contact Betty Rosen at 602-364-1051 for certification information.

Each manufacturer of factory-built buildings and subassemblies must submit plans to the Office for approval, prior to the construction of their units. You may contact Betty Rosen at 602-364-1051 for plan approval information.

**TO ALL APPLICANTS:**

Please refer to the enclosed filing instructions.

This Office does not issue temporary licenses. Once all of the licensing requirements are met, if there are no immediate background issues, the Office will issue a license on a conditional basis, pending the background investigation. Once the background information is completed, and if the background(s) of applicant(s) are acceptable to the Office, a letter will be sent informing you that the license has been given permanent status. Another license will not be issued at that time.



## DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

1110 WEST WASHINGTON, SUITE 100  
PHOENIX, ARIZONA 85007  
(602) 364-1003  
(602) 364-1052 FAX

OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

### FILING INSTRUCTIONS FOR APPLICATION FOR LICENSE

Application and all supporting documents, and testing if required, must be completed within **ninety (90) days** of submitting the application and applicable fee. **Failure** to complete licensure within (90) days will **result in forfeiture of fees**.

Application and all documents must be completed, typed or plainly printed in black ink.

Each license classification application requires one original Application for License, plus supporting documentation. No license will be issued prior to submitting and/or completing ALL requirements.

**All fees** submitted for licensure are **nonrefundable**. The Refund Policy statement must be signed and returned with the completed application and applicable filing fees before the Department will review your application.

#### I. APPLICATION FOR LICENSE

Application must be completed in its entirety, typed or plainly printed with black pen, properly signed and notarized.

##### A. License Classification

Check appropriate box for proper license designation and scope as described in License Scopes of the Rules.

##### B. Section A-Identification

1. Business Name of applicant as it is to appear on the license. Include d/b/a, (doing business as) if any. Same line requires the business telephone number.
2. Principal Place of Business should be the actual location where business transactions will be conducted and records will be kept. If rural route or no street address, include brief description such as "corner of, intersections or junctions." Please include **county**.
3. Mailing Address: List if different from Principal Place of Business, including **county**, such as Post Office Box, Corporate Headquarters, or other location where written communication is to be delivered.
4. Doing Business As: Check appropriate box to identify the entity of the applicant for license, i.e., partnership, corporation, etc.
5. Branch Location: List branch name, if different from business name, address and telephone number of any additional location(s) at which applicant will be conducting business under the applied for license. Proof that the "branch location" is not a separate legal entity may be required. See Section IV, for bonding requirements.

C. Section B - Qualifying Party

1. Enter name, residence address, and telephone number and the date of birth of Qualifying Party. Refer to Section III, Certificate of Qualifying Party for a description of responsibilities. The Qualifying Party must reside in the same state that is listed as the principal place of business on the application.
2. Check appropriate box to indicate the position held by the Qualifying Party.

D. Section C - Statutory Agent

"Statutory Agent" means an adult person who has been a bona fide resident of this state for at least three years and has agreed to act as agent for a licensee.

"Person" includes a corporation, company, partnership, firm, association or society, as well as a natural person.

E. Section D - Official Personnel

1. List **full** name, title, date of birth, residence address and telephone number of: a) Owner, if applying an individual, b) All partners of a partnership, c) President, Vice President, Secretary and Treasurer, if applying as a corporation, d) Managing Members, if applying as a Limited Liability Company and e) Qualifying Party for all applications.

F. Section E - Questions

1. Complete by checking "yes" or "no" to the five questions. Questions 1 – 4 apply to all individuals listed under Section D of the Application.  
An **explanation** is required for a "Yes" answer to Questions 1 - 4.  
**Court documents** are required for a "Yes" answer to Questions 3 or 4.  
**In answer to Question 5, parties listed under Section D that must respond by providing completed and signed Arizona Statement of Citizenship and Alien Status for State Public Benefits (Long Form Applicant Statement) and by providing a legible copy of one or more of the documents from the attached List A or List B, are the Owner and the Qualifying Party if applying as an Individual and only the Qualifying Party if applying as a business entity such as a corporation, partnership, limited liability company or the like.**

PLEASE NOTE: Question 1 pertains to any type of business license, i.e., liquor, real estate, etc. issued in Arizona or any other state. This question does not limit itself in years. (Example: If you had a real estate license ten years ago, list that license on Question 1, whether license is still active or not).

G. Section F  
Thoroughly read this section of the Application. By signing the application, each person signing is agreeing to be personally responsible for compliance with the Law (Arizona Revised Statutes) and the Rules of the Department as they pertain to the applied for license. Refer to the Instructions for Signing located on back of the application.

H. Section G - Signing of Application

Instructions for signature are on the application. No application will be accepted unless signed and notarized as indicated in these instructions.

## II. CORPORATE AND LIMITED LIABILITY COMPANY APPLICANT REQUIREMENTS

Corporate and LLC applicants shall submit a copy of the Articles of Incorporation/Organization from the state in which the Corporation or LLC was formed, along with a letter of good standing from that state. If a foreign corporation (outside of Arizona), you must apply with the Arizona Corporation Commission for a Certificate of Authority to Transact Business in the State of Arizona, a copy of the Certificate of Authority must be submitted by the applicant to our office as part of the licensing requirements. You can reach the Arizona Corporation Commission at (602) 542-3135 to obtain the requirements for this procedure. Due to the length of time it takes to obtain the Certificate of Authority from the Arizona Corporation Commission, you may wish to apply for this **prior** to submitting your application for license to the Department of Fire, Building and Life Safety, as you are under a 90-day time limit to complete all requirements or forfeit your licensing fees.

## III. CERTIFICATE OF QUALIFYING PARTY

- A. Each applicant must have a Qualifying Party. "Qualifying Party" means a person who is an owner, employee, corporate officer member or partner of the licensed business and who has active and direct supervision of and responsibility for all operations of that licensed business. The Qualifying Party shall insure full compliance with all provisions of the Statutes and Rules under the jurisdiction of the Department.
- B. The Qualifying Party must reside within the state of the principal place of the licensee's business, as listed on the license application and shall not act in the capacity of a qualifying party for more than one license of the same class.
- C. Complete form as follows:
1. Full name, date of birth, residence address and telephone number of person named as the Qualifying Party.
  2. Applicant's business name as shown on the Application for License.
  3. License classification by number and name, i.e., D-8 Dealer of Manufactured or Mobile Homes, I-10C General Installer of Manufactured or Mobile Homes, or Single Family Factory-Built Buildings, or M-9C Manufacturer of Manufactured Homes, etc.
  4. Underline the appropriate position held on the third line of the first paragraph.
  5. Properly notarized signature of Qualifying Party.

IV. **BOND REQUIREMENTS**

- A. Before granting a license, the Deputy Director shall require a cash deposit or surety bond on the form provided, which shall be continuous in form. The amount of the bond is determined by the type and scope of the applied for license.
- B. A separate bond or cash deposit is required for each branch location at which an applicant or licensee will be conducting business under a Manufacturer, Dealer or Installer license. (Dealer applicants under the D-8 or D-12 are not required to file branch bonds.) Space is provided for such branch location address in the upper right corner of the license bond form.
1. The enclosed License Bond form is to be completed by the bonding company. Cash bonds are to be completed as described in Paragraph D.
  2. No license shall be renewed unless the licensee's surety bond or cash deposit (when required) is in full force and effect.
- C. Surety (bonding) Company to complete bond form as follows:
1. **Side one of form:**
    - a. Upper right corner: Indicate bond number. If applicable, show the branch name (only if different from the principal name) and branch address on lines provided. The branch information is to be filled out when the bond is covering that branch only. If the bond is covering the principal place of business location, no information is recorded in the branch information.
    - b. 1st Line: Principal's name exactly as shown on Application.
    - c. 2nd Line: Principal's physical business address as shown on Application.
    - d. 3rd Line: Indicate license classification, i.e., D-8, I-10C, M-9A, etc., as shown on Application.
    - e. 4th Line: Name of surety (bonding) company and claims address/phone number.
    - f. 5th Line: Amount of bond in words and numerals.
  2. **Side two of form:**
    - a. Date bonding company signed and sealed the bond.
    - b. Effective date of bond.
    - c. Signatures, left side:  
Full business name of applicant, typewritten or printed.  
Applicant's signature and title.  
Countersignature by surety Arizona resident agent (if applicable).  
Type or print name of Arizona resident agent, name, address and telephone number of Arizona company represented as indicated (if applicable).  
If bond not countersigned, provide name, address, and phone number where claims against the bond should be sent.
    - d. Signatures, right side:  
Name of surety typed or printed.  
Signature of person acknowledging for the surety, and type or print name and title on line below. Surety signature must be notarized.

D. Cash Bond

1. A cash bond may be posted in lieu of a surety bond. Any one of the following may be deposited with the :
  - a. Cash;
  - b. Certified check payable to the State Treasurer;
  - c. Cashier's check payable to the State Treasurer;
  - d. Bank money order payable to the State Treasurer;
  - e. Postal money order payable to the State Treasurer.
2. A personal check is **not** acceptable for a cash bond deposit.
3. Cash deposits may be withdrawn, upon written request, two years from:
  - a. Termination of the license for which the cash deposit was posted, provided there are no outstanding claims, or
  - b. Filing of a commercial surety bond as replacement of the cash deposit.

V. **INFORMATION ABOUT APPLICANT**

- A. If prior to the issuance of the license, information is brought to the attention of the Assistant Director concerning the qualifications of the applicant or the personnel listed on the application that , in the Assistant Director's discretion, might be grounds to deny the license, the Assistant Director may forthwith notify the applicant that the license is denied.
- B. If the license application is denied, the applicant may make a written request for hearing.

VI. **TRUST OR ESCROW REQUIREMENTS – DEALERS/BROKERS/RETAILERS**

- A. Prior to issuance of a license, each applicable dealer/broker/retailer applicant shall notify the Department, on the form provided, of the name and number of the account established as the trust or escrow account, the name and **ARIZONA** location of the financial institution where the account was established, and the date the account was opened. An applicant may keep up to \$200.00 of its own funds in the trust or escrow account to offset service charges. If you choose to utilize a title company instead of opening an account with a financial institution, the account number on the Trust or Escrow Account Authorization for Release of Information form should be filled in as "various" because the title company will assign a different escrow number for each customer.
- B. The dealer/broker/retailer shall authorize the release of any and all information relative to the trust or escrow account to the Department by completing, signing and returning the provided Trust or Escrow Account Authorization for Release of Information form.
- C. The applicant must submit a copy of the trust or escrow account signature card to the Department with the completed Trust or Escrow Account Authorization for Release of Information form. If a title company is utilized instead of a trust or escrow account, a copy of the signature card is not applicable.

VII. **WRITTEN EXAMINATIONS – DEALER/BROKER/RETAILER OR INSTALLER CLASSIFICATIONS**

- A. Prior to the issuance of a dealer/broker/retailer or installer license, the Qualifying Party for the license shall successfully show by written examination, qualifications in the kind of work or business in which the applicant proposes to engage. A replacement Qualifying Party for an existing license must also successfully complete the required examination. Manufacturer applicants are not required to take an examination.
- B. Upon the applicant's filing of the Application for License with the appropriate fee and the Refund Policy statement, the Department will notify the applicant, in writing, regarding the items remaining to complete the application process, including (if applicable) the examination requirement. Exams are given **by appointment only** and at the **Phoenix location only**. The examinee must show proper identification (i.e. driver's license) at the time of testing. No materials are allowed in the testing room.
- C. Two hours will be allowed to complete the examination. A grade of 70% is required to pass exams. Notification of the test results will usually be given to you prior to leaving the office. Examinee will be allowed only three attempts to successfully complete the required examination.
- D. In the event of failure, a retake examination will be scheduled on the next available testing date.
- E. In addition to meeting the applicable requirements, an applicant for an installer I-10C, I-10D, or I-10G license shall:
  - 1. Have a minimum of 3 years practical or field management experience in the specific type of installation, a related construction field, or the equivalent, for which the applicant is applying. At least 2 of the 3 years experience shall be within 10 years of the date of the application. The applicant may substitute technical training in the specific type of installation, a related construction field, or the equivalent, from an accredited college or university or from a Department of Fire, Building and Life Safety workshop for no more than 1 year of the 3 years experience required. Certification Experience Verification forms must be completed by past or present employers and submitted to the Department.
  - 2. Supply a certified copy of each official transcript or certificate, demonstrating successful completion of any technical training the applicant wishes the Department to consider as proof of meeting the experience requirement.

F. Study Information:

1. Dealer/Broker/Retailer and Installer examinations will consist of general knowledge of the Arizona Revised Statutes and Rules of the Department of Fire, Building and Life Safety, as they pertain to the applied for license and questions from the Building Contractor's Exam Preparation Guide. All study materials are the responsibility of the examinee. The Statutes/Rules can be found at our website of [www.dfbls.az.gov](http://www.dfbls.az.gov). The examinee/applicant will need to contact book store or library for Contractor's Exam Preparation Guide.
2. Installers will also need a general knowledge of the INTERNATIONAL RESIDENTIAL CODE, UNIFORM PLUMBING CODE, and NATIONAL ELECTRICAL CODE. The separate study information sheet is included in the licensing packet.
3. The code books and Building Contractor's Exam Preparation Guide may be available at local libraries, the local city or county building departments or book stores.

- G. Effective January 1, 2010, all applicants for installer licenses must take the MHI on-line course and pass the test. The fee for the class is \$235.00. The link to the MHI on-line course is: [http://www.factorybuilthousing.com/lib/showtemp\\_detail.asp?id=432&cat=16](http://www.factorybuilthousing.com/lib/showtemp_detail.asp?id=432&cat=16)  
Scroll down the website page to find "*Click here to register with a printable registration form and pay by check for the Arizona course.*" Applicants can also find the link to the on-line course and examination at our website of [www.dfbls.az.gov](http://www.dfbls.az.gov).

VIII. **MANUFACTURER SUBMISSION OF CONSTRUCTION PLANS**

Prior to the construction of any factory-built building or subassembly, each manufacturer who intends to manufacture for delivery or sell such a unit in this state shall submit to the Assistant Director for approval, detailed plans of each model and shall have obtained such approval. No plans will be reviewed prior to your license number being issued. For questions related to plans, please contact the Engineering Section of the Department.

IX. **MANUFACTURER PLANT CERTIFICATION**

- A. Manufactured Homes The plant certification shall be pursuant to the Federal Manufactured Home Procedural and Enforcement Regulations published pursuant to the Act defined in A.R.S. 41-2142.2.
- B. Factory-Built Buildings and Subassemblies Each manufacturing facility shall be certified by the Office or an authorized representative as to capability to manufacture units or subassemblies as shown on the Office approved drawings, specifications and quality assurance manual.

**X. FINGERPRINTING REQUIREMENTS – ALL APPLICANTS**

- A. The fingerprinting requirements and cards are enclosed. If you need additional cards, please contact the Department. Refer to the separate Fingerprinting Instructions for important additional information.
- B. One set of fingerprints with a processing fee of \$24.00, payable to the Department of Fire, Building and Life Safety, in **certified funds or exact cash** will be required for persons listed in section D of the application, as shown below:
  - 1. Qualifying Party
  - 2. Individual named as Sole Proprietor
  - 3. All Partners of a Partnership
  - 4. All Managing Members of a Limited Liability Company
  - 5. All General Partners of a Limited Partnership
  - 6. The President, Vice President, Secretary and Treasurer of a Corporation

**XI. AGREEMENT FOR CONDITIONAL LICENSE**

- A. There may be a rather lengthy delay in issuing a license due to difficulties encountered by the Department in obtaining the necessary background information for review prior to issuance of the permanent license. If an applicant wishes to sign an agreement with the Department, we will issue the license, upon completion of all other requirements, on a conditional basis that will allow you to conduct business under the license until the background information is received by the Department. At that time, the license will either become permanent or it will be automatically revoked if the background information is of such a nature that a license denial is in order.
- B. If you elect to sign the Agreement for Conditional License to receive a conditional license number under this agreement, the properly signed agreement must be forwarded to the Department. Complete the Agreement for Conditional License form as described below.
  - 1. Insert business name as shown on the application form, on the line provided in the first paragraph.
  - 2. The Qualifying Party, Owner of a Sole Proprietorship, Partner in a Partnership, Officer in a Corporation, Managing Member on a Limited Liability Company or General Partner in a Limited Partnership may sign the Agreement for Conditional License.
  - 3. Date the document where provided and have signatures notarized.

## XII. AUTHORIZATION FOR RELEASE OF INFORMATION

- A. An Authorization for Release of Information form is required for each person listed in section D of the Application, as shown below.
1. Qualifying Party
  2. Individual named as Sole Proprietor
  3. Each Partner of a Partnership
  4. All Managing Members of a Limited Liability Company
  5. All General Partners of a Limited Partnership
  6. The President, Vice President, Secretary and Treasurer of a Corporation
- B. The Authorization for Release of Information form must be completed as described below.
1. Insert **full** name of individual, including **full middle name**, and date of birth.
  2. Insert individual's **residence** address, including **county**.
  3. Insert individual's **residence** phone number and **business** address, including **county**, as listed on the license Application.
  4. Insert **business** phone number and the Position held by the individual (i.e. Qualifying Party, President, Owner, etc.).
  5. Insert the classification of license applied for as listed on the Application form (i.e. M-9A, I-10C, D-8, etc.).
  6. Insert the business name as listed on the Application form.
- C. Please read the authorization statement before signing. Signature must be notarized.

## XIII. REFUND POLICY

It is the policy of this office that all funds received relating to licensure are **nonrefundable**. The form acknowledging this policy must be signed by the applicant and returned with the license application and application fees before the Department will review your application.

## **SUPPLEMENTAL INFORMATION FOR INSTALLER APPLICANTS**

In addition to meeting the applicable requirements in R4-34-204, subsections (A) (1) through (3), an applicant for an installer I-10C, I-10D, or I-10G license shall:

1. Have a minimum of 3 years practical or field management experience in the specific type of installation, a related construction field, or the equivalent, for which the applicant is applying. At least 2 of the 3 years experience shall be within 10 years of the date of the application. The applicant may substitute technical training in the specific type of installation, a related construction field, or the equivalent, from an accredited college or university or from a Department of Fire, Building and Life Safety workshop for no more than 1 year of the 3 years experience required in this subsection.
2. Supply a completed Certification Experience Verification form from each employer or other individual who was or is properly licensed by the Department or Registrar of Contractors to perform the work described under “duties and responsibilities” on the Certification Experience Verification form. The verifier must be familiar with the applicant’s employment or other work experience. The Certification Experience Verification form must include the name, address, and telephone number of the individual making the statement (i.e. the verifier), the dates of the applicant’s employment or other work experience, a description of the position held, and the Certification Experience Verification form must bear the notarized signature of the verifier, indicating that the verifier vouches for the truthfulness of the statement as proof of meeting the experience requirement in subsection (B) (1); and
3. Supply a certified copy of each official transcript or certificate, demonstrating successful completion of any technical training the applicant wishes the Department to consider as proof of meeting the experience requirement in subsection (B) (1).

See attached Certification Experience Verification forms that must be completed by past or present employers or other individuals who were or are properly licensed by the Department or Registrar of Contractors.

STATE OF ARIZONA



DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY
OFFICE OF ADMINISTRATION
1110 WEST WASHINGTON, SUITE 100
PHOENIX, AZ 85007-2935
(602) 364-1003

Applicants, do not write in this space

Date Filed \_\_\_\_\_

Receipt No. \_\_\_\_\_ Fee \_\_\_\_\_

Class \_\_\_\_\_

License No. \_\_\_\_\_

Issued \_\_\_\_\_ Approved \_\_\_\_\_

APPLICATION FOR LICENSE

CHECK APPLICABLE BOX

MANUFACTURER

- M-9A, M-9C, M-9E

DEALER/BROKER

- D-8, D-10, D-8B, D-12

INSTALLER

- I-10C, I-10D, I-10G

TYPE OR PRINT IN BLACK INK

SECTION A

Business Name \_\_\_\_\_ Type or print \_\_\_\_\_ Area Code Phone Number \_\_\_\_\_

Principal Place of Business \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Doing Business As: Individual Partnership Limited Partnership Corporation Limited Liability Company

BRANCH LOCATIONS

1. Branch Name \_\_\_\_\_ Area Code Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

2. Branch Name \_\_\_\_\_ Area Code Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. Branch Name \_\_\_\_\_ Area Code Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

4. Branch Name \_\_\_\_\_ Area Code Phone Number \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Attach separate sheet for additional locations if necessary.

SECTION B

Name of Qualifying Party \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Residence Street Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code / Phone Number \_\_\_\_\_

Qualifying Party is (check one) Owner Partner Corporate Officer Employee Member Managing Member

SECTION C

Arizona Statutory Agent \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Area Code / Phone Number \_\_\_\_\_

Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

NOTICE

If all requirements are not completed within ninety (90) days from the date of filing the application, the licensing fee will be forfeited.
DFBLS OA 102 (10/07)

**SECTION D**

The Personnel of Applicant shall include: the qualifying party in all instances; if an individual, the individual applying; if a partnership, all partners of the partnership; if a corporation, the president, vice president, secretary and treasurer; if a limited liability company, all members and managing members, in a limited partnership, all general partners and limited partners.

Please type or print

Last Name – First – Full Middle	Title or Position	Date of Birth	Complete Residence Address & Phone Number

**SECTION E**

For purposes of the questions below, "person" means an applicant, an individual, a qualifying party, any partner of a partnership, any general partner of a limited partnership, the president, vice president, secretary and treasurer of a corporation and any managing member of a limited liability company.

- Has any person described above been affiliated with any business license issued by any state?  
 Yes  No If yes, give state, license type, license number, classification, status of license and position or affiliation held.

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- Has any person described above acted in the capacity of Qualifying Party in this or any other state?  
 Yes  No If yes, attach details
- Has any person described above within one year prior to date of the application, had a license refused or revoked?  
 Yes  No If yes, attach details
- Has any person described above been arrested or convicted of a felony in any state or federal jurisdiction, or had final judgment brought against them in a civil action upon grounds of fraud, misrepresentation or deceit?  
 Yes  No If yes, attach details, including court documents
- Are all parties, listed under Section D above, citizens of the United States?  Yes  No Provide legal documentation which identifies your name, and status as a U.S. Citizen. If you are not a U.S. Citizen, provide written documentation identifying the country of which you are a citizen and provide documentation that demonstrates your legal right to live and work in the United States.

**SECTION F**

I (we) hereby agree to comply with ALL provisions of Arizona Revised Statutes, Title 41, Chapter 16, Article 1,2,3,4, and 5, and the Rules and Regulations of the Department Fire, Building and Life Safety.

**SECTION G** The application must have notarized signatures of the following:

- Individual – the individual and the qualifying party.
- Partnership - each partner and the qualifying party.
- Limited Partnership – each general partner and the qualifying party.
- Corporation - the president, vice president, secretary, treasurer and the qualifying party.
- Limited Liability Company - each managing member and the qualifying party.

NO license shall be issued to a minor

I (WE) THE UNDERSIGNED, HEREBY APPLY TO THE STATE OF ARIZONA, DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY FOR THE ABOVE LICENSE AND ATTEST TO THE TRUTH AND ACCURACY OF ALL STATEMENTS AND ANSWERS HEREIN CONTAINED.

X \_\_\_\_\_ Title \_\_\_\_\_ X \_\_\_\_\_ Title \_\_\_\_\_  
X \_\_\_\_\_ Title \_\_\_\_\_ X \_\_\_\_\_ Title \_\_\_\_\_  
X \_\_\_\_\_ Title \_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_. (NOTARY SEAL)

My commission expires \_\_\_\_\_ Notary Public Signature \_\_\_\_\_



## DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

1110 WEST WASHINGTON, SUITE 100  
PHOENIX, ARIZONA 85007  
(602) 364-1003  
(602) 364-1052 FAX

OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

**SUBJECT:** Supplemental Information for License Application

To facilitate the processing of your application for a license, the following is needed in documentary form:

1. Approximate date of arrest(s).
2. Location of arrest(s).
3. Any prior arrest(s), date and location.
4. Name of prosecuting Agency(s), County Attorney, District Attorney, Attorney General, etc., and location(s).
5. Name of Defense Attorney(s).
6. Case Number(s).
7. Court(s) where convicted (each offense).  
(city, County, State, Federal, etc.)
8. Date(s) of conviction(s) (approximate).
9. Copy of Judgement of conviction(s).
10. Name of Parole Officer(s) or Probation Officer(s).
11. In your own words, describe violation(s).

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Classification



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**AGREEMENT FOR CONDITIONAL LICENSE**

This agreement is entered into between the Office of Administration (Office) and

\_\_\_\_\_ (Applicant's Name) subject to terms and conditions as hereinafter set forth and pursuant to A.R.S. 41-2176.B., C., and .D.

Upon completion of all other requirements, the Office agrees to grant the applicant a conditional license, pending the results of the background analysis. Once the background analysis is completed, if the applicant's background is acceptable and the applicant did not make any misrepresentations, depending on the results, permanent status or probation will be given to the license.

The Director shall revoke the applicant's conditional license and shall refuse to issue the permanent license if there are material misrepresentations or fraud in the application to obtain a license.

The applicant agrees that the conditional license issued to him/her shall be revoked if it appears that the applicant has misrepresented his/her criminal background.

The applicant further agrees to waive and does hereby waive any and all right they may have to a stay of the effectiveness of any order of revocation of the conditional license. The applicant also agrees to waive and does hereby waive any right to notice of hearing prior to revocation of the conditional license.

The applicant may demand a hearing on the order of revocation pursuant to Arizona Revised Statutes, Title 41, Chapter 16, Articles 1, 2, 3, 4, and 5 and consistent with this agreement by making written demand for hearing, setting forth the relief requested and the basis for the relief.

\_\_\_\_\_  
Applicant's Signature

State of Arizona            )  
County of                    )

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared

\_\_\_\_\_, whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that he/she executed the same.

\_\_\_\_\_  
Notary Public  
Commission Expires \_\_\_\_\_  
B&FS OA 105 (3/00)



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**CERTIFICATE OF QUALIFYING PARTY**

PLEASE TYPE OR PRINT:

FULL NAME: \_\_\_\_\_ (DATE OF BIRTH) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ (RESIDENCE ADDRESS) \_\_\_\_\_  
\_\_\_\_\_ (CITY, STATE, ZIP CODE) \_\_\_\_\_ (PHONE NUMBER) \_\_\_\_\_

COMPANY: \_\_\_\_\_ CLASSIFICATION: \_\_\_\_\_

I HEREBY CERTIFY THAT I have been appointed to act as the QUALIFYING PARTY for the above-named license issued by the Office of Administration, as QUALIFYING PARTY I am a bona fide owner, corporate officer, member, partner; employee (underline one) of the above named license. I assume full responsibility for compliance with the provisions of Arizona Revised Statutes, Title 41, Chapter 16, Articles 1, 2, 3, 4, and 5 and the Rules and Regulations adopted pursuant thereto by the Board of Manufactured Housing. If for any reason I become disassociated or cease to be the QUALIFYING PARTY for the above mentioned licensee, I will within (5) days notify the Office of Administration in writing.

- 1. Are you presently acting or have you previously acted on a license in the capacity of Qualifying Party in this or any other State? Yes  No
- 2. Have you had a license refused or revoked within the past twelve months? Yes  No
- 3. Have you been convicted of a felony in any state or federal jurisdiction, or had a final judgement brought against you in a civil action upon grounds or fraud, misrepresentation or deceit. Yes  No

NOTE: A yes answer to any of the above requires you to provide details.

I HEREBY CERTIFY under penalty of perjury that the foregoing is true and correct, and vouch for the truth and accuracy of all supplementary statements, answers and representations attached hereto and made a part of this application.

SIGNATURE: \_\_\_\_\_  
(Qualifying Party)

STATE OF ARIZONA )  
COUNTY OF )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

My Commission expires \_\_\_\_\_ Notary Public \_\_\_\_\_



## DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

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OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

### BOND REQUIREMENTS

### COMPLETION INSTRUCTIONS

- A. Pursuant to A.R.S. §41-2179, before granting an original license, the Deputy Director shall require a surety bond or cash deposit on the form provided, which shall be continuous in form. The amount of the bond is determined by the type and scope of the applied for license.
- B. A separate bond or cash deposit is required for each branch location. Space is provided for such branch location address in the upper right corner of the License Bond Form B&FS OA 107.
1. Dealer, Broker and Installer Branch Locations means a separate business location from the licensee's principal place of business where transactions are conducted.
  2. Manufacturer Branch Location means a separate business location from the licensee's principal place of business where units are manufactured.
- C. Surety (bonding) company to complete License Bond Form B&FS OA 107 as follows:
1. Side one of form:
    - a. Upper right corner indicate bond number. If applicable, show licensee's branch address on lines provided. See Paragraph B. above.
    - b. 1st Line: Name of business exactly as shown on the Application.
    - c. 2nd Line: Licensee's principal physical business address as shown on Application.
    - d. 3rd Line: Indicate license classification, i.e., D-8, I-10C, M-9A, etc., as shown on Application.
    - e. 4th Line: Name of Surety (bonding) Company and Claims Address for Surety Company.
    - f. 5th Line: Amount of bond in words and numerals.
  2. Side two of form:
    - a. Date bonding company signed and sealed the bond.
    - b. Effective date of bond.
    - c. Signatures, left side:  
Full business name of applicant, typewritten or printed.  
**Signature and title of applicant.**  
**Type or print the name, mailing address and telephone number for the purpose of filing claims in this section.**
    - d. Signatures, right side:  
Name of surety typed or printed.  
Signature of person acknowledging for the surety; and,  
Type or print name and title on line below.  
**Surety signature must be notarized.**
- D. **TO AVOID DELAY** or inconvenience, be sure the bond is completed as delineated above. If necessary, the bond will be returned for correction or a rider will be requested to properly complete the bond before issuance of the license.

STATE OF ARIZONA



DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY
OFFICE OF ADMINISTRATION
1110 WEST WASHINGTON, SUITE 100
PHOENIX, AZ 85007-2935
(602) 364-1003

Bond Number \_\_\_\_\_

Branch (of principal) if applicable

Name \_\_\_\_\_

Address \_\_\_\_\_

LICENSE BOND

KNOW ALL MEN BY THESE PRESENTS:

That we \_\_\_\_\_

as Principal, whose physical business address is \_\_\_\_\_

conducting business under the classification of \_\_\_\_\_

and \_\_\_\_\_

a corporation duly authorized and licensed to transact surety business in the State of Arizona, for the purpose of making, guaranteeing or becoming sole surety upon bonds or undertakings required or authorized by the laws of the State of Arizona as surety, are held and firmly bound unto the State of Arizona for the benefit of:

- 1. Any purchaser of a manufactured home, mobile home, factory-built building or subassembly thereof who is damaged by the failure of the Principal to perform a sales or installation agreement or fails to perform repairs under a warranty, as provided by A.R.S. §41-2179.D;
2. The Deputy Director of the Office of Administration, if the Principal owes said Office under the provision of Articles 1,2,3,4, and 5, Chapter 16, Title 41, Arizona Revised Statutes, and the Rules adopted pursuant thereto;

In the sum of: \_\_\_\_\_ (\$ \_\_\_\_\_) lawful money of the United States of America for payment under the terms expressed herein, we bind ourselves, our heirs, executors, successors and assignees, jointly and severally, firmly by these presents.

THE CONDITION OF THE FOREGOING OBLIGATION IS SUCH THAT:

Whereas, the above bounden Principal has made application with the Office of Administration, Department of Fire, Building and Life Safety of the State of Arizona for a license to conduct business under the classification and at the address set forth above and tenders this bond to comply with the provisions of Articles 1,2,3,4, and 5, Chapter 16, Title 41, Arizona Revised Statutes, and the Rules adopted pursuant thereto by the Board of the Office of Manufactured Housing.

The persons claiming against this bond may maintain action at law against the Principal and the Surety and this bond may be sued upon in successive actions until the full amount thereof is exhausted. No suit may be commenced on this bond after the expiration of two years following the commission of the act on which the suit is based except that the time for purposes of the claim for fraud shall be measured as provided in A.R.S. §12-543.

It is further provided that upon any demand or claim against the bond the Surety shall give notice to the Deputy Director by registered mail of any such demand or claim and of any judgment, recovery or settlement made prior to the payment thereof. This bond shall be continuous in form and shall be conditioned that the total aggregate liability of the Surety for all claims shall be limited to the face amount of the bond irrespective of the number of years this bond is in force. If the Surety desires to make payment without awaiting court actions, the amount of this bond shall be reduced to the extent of any payment or payments made by the Surety, in good faith thereunder. Any such payments shall be based on priority of written claims received by the Surety prior to court action.

(OVER)

The liability of the Surety may be terminated and this bond cancelled as to future liability by the giving of written notice by the Surety to the Deputy Director, of the Surety's desire to terminate liability and by stating in such notice the effective date of such termination, which shall not be less that thirty (30) days from the receipt of such notice by the Deputy Director.

Previous locations are automatically covered by the existing bond when a rider or endorsement is received by the Department indicating a new location.

Nothing in this bond shall be construed to be in conflict with the provisions of Articles 1,2,3,4, and 5, Chapter 16, Title 41, of the Arizona Revised Statutes.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

This bond becomes effective on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Type or Print Licensed Business Name

\_\_\_\_\_  
(Name of Principal)

\_\_\_\_\_  
(Name of Surety)

By: \_\_\_\_\_  
(Signature & Title of Principal)

By: \_\_\_\_\_  
Signature of Person Signing for Surety

\_\_\_\_\_  
Agent (Type or Print Name)

By: \_\_\_\_\_  
(Type Name & Title of Person Signing for Surety)

\_\_\_\_\_  
Representing (Name of Company)

This instrument was acknowledged  
Before me this \_\_\_ day of \_\_, 20 \_\_\_\_.

\_\_\_\_\_  
(Area Code) (Telephone Number)

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
(Mailing Address)

My commission Expires \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip)

STATE OF \_\_\_\_\_

**NOTE: Provide address and phone number where claims against this bond are to be sent in the spaces appropriated above for insurance agent if bond is not being countersigned by insurance/surety Agent.**

COUNTY OF \_\_\_\_\_

**SIGNATURE OF SURETY MUST BE NOTARIZED**

**NOTE**

In cases where a minor discrepancy exists between the information contained on the license application and that contained on the bond, the clarification notice below will be filled in to reflect the proper information. A copy of the bond form with the completed clarification notice will then be sent to the surety. If written notice from the surety is not received by the Office of Administration contradicting the information contained in the clarification notice, it will be assumed that such information is correct. This procedure will eliminate the delays caused by bond rider requests when minor differences exist.

**DO NOT WRITE BELOW  
LICENSEE'S BOND CLARIFICATION NOTICE**

The Office of Administration's records indicate that the correct business name, license classification and/or form of business for the Licensee covered by this surety bond is as stated below.  
Business Name \_\_\_\_\_  
Classification \_\_\_\_\_  
Form of Business: Individual  Partnership  Corporation  Limited Liability Co.   
Other \_\_\_\_\_  
I certify that on \_\_\_\_\_ a copy of this notice was mailed postage prepaid to:  
Date  
\_\_\_\_\_  
Surety's Name By \_\_\_\_\_  
Signature of Licensing Clerk



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OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

**STATEMENT OF AUTHORIZATION AND RELEASE OF INFORMATION**

I, \_\_\_\_\_,  
(Full Name) (Date of Birth)

whose home address is \_\_\_\_\_  
(Street address, County, City, State, Zip Code)

telephone no. \_\_\_\_\_, and whose business address is \_\_\_\_\_

\_\_\_\_\_ (Street address, County, City, State, Zip Code)

telephone no. \_\_\_\_\_, shown as the \_\_\_\_\_  
(owner, president, etc.)

on an application for license as \_\_\_\_\_  
(Type of license applied for, D-8, I-10C, M-9A, etc.)

in the name of \_\_\_\_\_,  
(Complete business name, as shown on the Application for license)

do hereby consent to having an inquiry made as to my moral character, professional reputation and fitness for said license.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me, to furnish to the Office of Administration any such information, including documents, records, or information regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the Office of Administration or any of its agents or representatives to inspect and make copies of such documents, records and other information.

I hereby release, discharge and exonerate the Office of Administration, its agents and representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information of the inquiry made by the Office of Administration.

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

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

\_\_\_\_\_  
(Signature) \_\_\_\_\_ (Date)

\_\_\_\_\_  
(Printed Name)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires \_\_\_\_\_ Notary Public \_\_\_\_\_

FINGERPRINTING REQUIREMENTS

The enclosed fingerprint card(s) must be completed as outlined below and returned to the Department of Fire, Building and Life Safety.

A. One set of fingerprints and fee are required for:

- 1. The Qualifying Party; and
- 2. the Individual named as Sole Proprietor, or
- 3. each Partner of a Partnership, or
- 4. the President, V.P., Secretary and Treasurer of a Corporation, or
- 5. the Managing Members of a Limited Liability Company, or
- 6. each General Partner of a Limited Partnership, or
- 5. any person applying for a Salesperson's license.

B. Fees

- 1. A \$24.00 fingerprint processing fee made payable to the Department of Fire, Building and Life Safety shall accompany each returned fingerprint card
- 2. The fee shall be paid by exact cash, cashier's check, money order, or other certified funds.
- 3. **NO PERSONAL CHECKS OR COMPANY CHECKS** will be accepted.

C. Where to be fingerprinted

The enclosed FBI fingerprint card(s) may be taken to the nearest law enforcement agency - police department or sheriff's office - at which time you will complete the necessary information and sign the card in the designated space. In addition to the fingerprint processing fee, the agency taking the fingerprints will also charge a fee which will vary according to their requirements.

D. All information must be typed or printed in black. Each block to be completed is given a number and the corresponding number description is outlined below.

- 1. Full name in all capital letters. If you only have a middle initial, designate (I.O.) (initial only) next to the middle initial; if you do not have a middle name or initial, designate NMI (no middle initial).

Last Name	First Name	Middle Name
DOE	JOHN	JOSEPH

- 2. Signature of individual being fingerprinted.
- 3. Complete residence address of the individual being fingerprinted, including apartment number, city, state and ZIP code.
- 4. Aliases: Other names that may have been used at any time.
- 5. Date of birth in numbers, such as 7-21-52.
- 6. Citizenship: The name of the country you are a citizen of: U.S.A. or other citizenship.
- 7. - 12. Personal description, abbreviated:

<u>Sex</u>	<u>Race</u>	<u>Hgt.</u>	<u>Wgt.</u>	<u>Eyes</u>	<u>Hair</u>
M	W	5'8"	165	BRN	BRN

- 13. Place of Birth: show city and state.

14. Armed Forces number: military enlistment number even if it is your social security number.
  15. Social security number: fill in the number even if it's shown in Block 14.
  16. Miscellaneous number: list any other identifying number.
  17. Date and signature of official taking the fingerprints.
- E. Taking of fingerprints. The following information **must be followed exactly** or the FBI will **reject the fingerprint card**. You may wish to provide these instructions to the fingerprint official.
1. Have fingerprint official make certain all impressions are taken in proper order, legible, fully rolled nail to nail and classifiable. All data called for is essential.
  2. If an amputation or deformity makes it impossible to print a finger, the fingerprint official should make a notation to that effect, (ie. "amp") in the individual finger block. **No** other writing is permitted in the fingerprint blocks.
  3. If some physical condition makes it impossible to obtain perfect impressions, submit the best that can be obtained. Make sure the fingerprint official does **NOT** stamp "best prints possible" on card.
  4. No highlighter can be used on the fingerprint blocks.
  5. If the fingerprint image bleeds onto the blue lines or overlaps the borders of that block, the card will be rejected.
  6. Fingerprints at the bottom of the page must be straight up and down on the card.
- F. Return of fingerprint card
1. **WARNING** - the fingerprint card(s) cannot be folded or defaced in any manner because they are machine processed.
  2. Return the card with the fingerprint processing fee, in certified fees.
  3. The fingerprint card(s) and fee(s) must be returned to the Department of Fire, Building and Life Safety **PRIOR** to issuance of the Conditional License. The background investigation must be completed before permanent status can be established.
- G. All FBI record searches will be treated as confidential information and will not be disclosed, except as provided by law.

## INSTALLER EXAMINEE STUDY INFORMATION

There are two parts to each Installer test and a passing grade of 70% is required for each part. The following information should be reviewed before taking the examinations.

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### Department of Fire, Building and Life Safety Statutes and Rules:

Study all material related to all licensees in general, including but not limited to definitions, grounds for disciplinary action, responding to verified complaints and citations and complaints and license scopes, as well as all material related to installers. The Statutes and Rules can be found on our website, [www.dfbls.az.gov](http://www.dfbls.az.gov).

### Use The Following References Listed Below for All Classifications:

1994 UNIFORM PLUMBING CODE (IAPMO) 2003 INTERNATIONAL RESIDENTIAL CODE (IRC)  
2002 NATIONAL ELECTRIC CODE (NEC) 1996 BUILDING CONTRACTOR'S EXAM PREPARATION GUIDE, Chapter 3 and Final Exam

### AND

Class I-10C- General Installer of Manufactured Homes, Mobile Homes, or Residential, Single-Family, Factory-Built Buildings:

<u>UPC</u>	<u>IRC</u>	<u>NEC</u>
604,605,608,609	M1413	210, 230, 250
707,708,718	M1601.2	310, 347
1211,1216,1218		550
314		
appendix E		

Class I-10D- Installer of Accessory Structures Attached to Manufactured Homes, Mobile Homes, or Residential, Single-Family, Factory-Built Buildings:

IRC  
R309.2, R312.1, R319.1(5)  
R402.1, R403.1.3.1, R408.3  
R502.10, R503.1, R506.1  
R602.3.1 (Exception 1), R602.3.3, R602.3.4, R602.6, R602.7, R603.1.2  
R703.4, Table R703.4  
R802.3.1, R802.7, R802.9  
R903  
M1413  
M1601.2

Class I-10G- Master Installer of Manufactured Homes, Mobile Homes or Residential, Single-Family, Factory-Built Buildings:

IRC  
R309.2, R312.1, R319.1(5)  
R402.1, R403.1.3.1, R408.3  
R502.10, R503.1, R506.1  
R602.3.1 (Exception 1), R602.3.3, R602.3.4, R602.6, R602.7, R603.1.2  
R703.4, Table R703.4  
R802.3.1, R802.7, R802.9  
R903  
M1413  
M1601.2

<u>UPC</u>	<u>NEC</u>
314	210, 230, 250
604,605,608,609	300,310,352
707,708, 718	550
1210,1211,1216,1218	
appendix E	

All study materials are the responsibility of the applicant to obtain. The International Residential Code, Uniform Plumbing Code, National Electric Code and the Building Contractor's Exam Preparation Guide may be available at the following locations:

City or County Planning, Zoning and/or Building Departments  
Public Libraries

Builder's Book Depot, 1001 E. Jefferson St., Ste. 5, Phoenix, AZ 85034, [www.buildersbookdepot.com](http://www.buildersbookdepot.com), phone: 800-284-3434  
Additional Book Stores – Consult Yellow Pages



**Form 1: LONG FORM APPLICANT STATEMENT (revised)  
REQUIRING SUBMISSION OF DOCUMENTATION OF STATUS**

**ARIZONA STATEMENT OF CITIZENSHIP  
AND ALIEN STATUS FOR STATE PUBLIC BENEFITS  
Professional License and Commercial License  
Department of Fire, Building and Life Safety**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

**Directions:** All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

**SECTION I — APPLICANT INFORMATION**

APPLICANT'S NAME (Print or type) \_\_\_\_\_ DATE \_\_\_\_\_

TYPE OF APPLICATION (check one)     INITIAL APPLICATION                       RENEWAL

TYPE OF LICENSE \_\_\_\_\_

**SECTION II — CITIZENSHIP OR NATIONAL STATUS DECLARATION**

**Directions:** Attach a legible copy of the front, and the back (if any), of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality. Name of document provided: \_\_\_\_\_

- A. Are you a citizen or national of the United States? (check one)     Yes                       No
- B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country.  
City \_\_\_\_\_ State (or equivalent) \_\_\_\_\_ Country or Territory \_\_\_\_\_

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

**SECTION III — ALIEN STATUS DECLARATION**

**Directions:** To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. Name of document provided: \_\_\_\_\_

**"Qualified Alien" Status** (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- Q** 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).

- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- 8. An alien who is, or whose child or child's parent is a "battered alien" or an alien subjected to extreme cruelty in the United States.

**Nonimmigrant Status** (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C. § 1101(a)(15).

**Alien Paroled into the United States For Less Than One Year** (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

**Other Persons** (8 U.S.C. § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*];
- 13. A foreign national not physically present in the United States.

**Otherwise Lawfully Present** (A.R.S. § 1-501)

- 14. A person not described in categories 1–13 who is otherwise lawfully present in the United States.  
**PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure.** See 8 U.S.C. § 1621(a).

**SECTION IV — DECLARATION**

**All applicants must complete this section.** I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
TODAY'S DATE

**Attachment: Lists A and B Evidence of U.S. Citizenship, U.S National Status, or Alien Status,**

11/08/07

81662

## **Attachment to Form 1 Applicant Statement**

### **EVIDENCE OF U.S. CITIZENSHIP, U.S NATIONAL STATUS, OR ALIEN STATUS**

#### **LIST A: U.S. CITIZEN OR U.S. NATIONAL**

Note: In this List, the term “Service” refers to the U.S. Citizenship and Immigration Service, formerly, the U.S. Immigration and Naturalization Service (INS).

[Source: Proposed Rules, Verification of Eligibility for Public Benefits, 8 CFR § 104.23; 63 FR 41662-01 August 4, 1998); and Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (“Interim Guidance”), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

#### **Evidence showing U.S. citizen or U.S. national status includes the following:**

##### **a. Primary Evidence:**

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-561, Certificate of Citizenship;
- (6) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (7) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively naturalized U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (8) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
- (9) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

[Source: Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (“Interim Guidance”), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

##### **b. Secondary Evidence**

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status:

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made;
- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;

- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parents(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;
- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a State-or jurisdiction-approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);

### **c. Collective Naturalization**

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

#### **Puerto Rico:**

- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or
- Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

#### **U.S. Virgin Islands:**

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

#### **Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):**

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

### **d. Derivative Citizenship**

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make a determination of derivative U.S. citizenship:

**Applicant born abroad to two U.S. citizen parents:** Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying possession prior to the applicant's birth.

**Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent:** Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant

to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

**Applicant born out of wedlock abroad to a U.S. citizen mother:** - Evidence of the U.S. citizenship of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

**Applicant born in the Canal Zone or the Republic of Panama:**

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

**e. Adoption of Foreign-Born Child by U.S. Citizen**

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

**f. U.S. Citizenship By Marriage**

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

## **LIST B: QUALIFIED ALIENS, NONIMMIGRANTS, AND ALIENS PAROLED INTO U.S. FOR LESS THAN ONE YEAR**

The documents listed below that are registration documents are indicated with an asterisk ("\*").

**a. “Qualified Aliens”**

Evidence of “Qualified Alien” status includes the following:

***Alien Lawfully Admitted for Permanent Residence***

- \*Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on \*I Form I-94.

***Asylee***

- \* Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- \*Form I-688B (Employment Authorization Card) annotated "274a.12(a)(5)";
- \* Form I-766 (Employment Authorization Document) annotated "A5";

- Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or
- Order of an immigration judge granting asylum.

***Refugee***

- \* Form I-94 annotated with stamp showing admission under § 207 of the INA;
- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- \* Form I-766 (Employment Authorization Document) annotated "A3"

***Alien Paroled Into the U.S. for a Least One Year***

- \* Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

***Alien Whose Deportation or Removal Was Withheld***

- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(10)";
- \* Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b)(3) of the INA.

***Alien Granted Conditional Entry***

- \* Form I-94 with stamp showing admission under §203(a)(7) of the INA;
- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- \* Form I-766 (Employment Authorization Document) annotated "A3."

***Cuban/Haitian Entrant***

- \* Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6;
- Unexpired temporary I-551 stamp in foreign passport or on \* Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d)(5) of the INA.

***Alien Who Has Been Declared a Battered Alien or Alien Subjected to Extreme Cruelty***

- U.S. Citizenship and Immigration Service petition and supporting documentation

**b. Nonimmigrant**

Evidence of "Nonimmigrant" status includes the following:

- \* Form I-94 with stamp showing authorized admission as nonimmigrant

**c. Alien Paroled into U.S. for Less than One Year**

Evidence includes:

- \* Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA

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11/08/07

Janice K. Brewer  
Governor



Gene Palma  
Director

## DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

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OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

TO: All Applicants for Licensure

SUBJECT: Refund Policy and Certification Form

It is the policy of this Department that all funds received relating to licensure are **nonrefundable**.

I, \_\_\_\_\_, swear that the above  
(Please Print)  
information pertaining to licensing fees being nonrefundable has been read and understood by  
me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_