REQUIREMENTS FOR LICENSE - CONTRACTOR

Access this form via website at: cca.hawaii.gov/pvl

Briefly, the requirements for a license are:

- 1) Be not less than 18 years of age;
- 2) Have a good reputation for honesty, truthfulness, financial integrity and fair dealing;
- 3) Have 4 years of supervisory experience within the past 10 years;
- 4) Pass an examination in the appropriate classification; and
- 5) Be employed by a licensed contracting entity.

This is the general licensure process and what you may expect after filing an application:

- 1) Applicant files application, fee and other required items on or before the first Tuesday of the month.
- 2) Board reviews complete applications the following month.
- 3) Board notifies applicant of approval/disapproval/deferral.
- 4) Approved applicant registers with a separate testing agency for exam and pays testing agency exam fees.
- 5) Applicant takes exam the following month.
- 6) Upon passing the exam, Board notifies applicant of license requirements.
- 7) Applicant submits license requirements.
- 8) Board issues license to applicant.
- 9) Maintain license.

APPLICATION FILING DEADLINE

Application, fee and all supporting documents to be presented to the Board must be received in the Board's Honolulu office <u>on or</u>

<u>before</u> the <u>first Tuesday</u> of the month prior to the scheduled meeting date. The Board is scheduled to meet once a month, except for the month of December. Refer to the schedule for all dates at: <u>cca.hawaii.gov/pvl/boards/contractor/meeting_schedule.</u>

Each application must be submitted with the following items for consideration by the Board: **FAXED or EMAILED COPIES WILL NOT BE ACCEPTED.**

- 1. Application fee;
- 2. Experience certificates;
- 3. Chronological History of Projects Form ("Project List");
- 4. Credit report; and
- 5. Entity appointment.

INSTRUCTIONS FOR FILING

APPLICATION Complete **all** pages of the application.

Failure to provide all the requested information will delay the processing of your application.

RELEASE OF INFORMATION

If an agency or individual is assisting you with the licensure process, we will not be able to release any information to them unless you provide us with authorization. If you wish to do so, please complete the portion on **Release of**

Information to Third Party, sign and date it.

SOCIAL SECURITY NUMBER Your Social Security Number is used to verify your identity for licensing purposes and for compliance with the below laws. For a license to be issued you must provide your Social Security Number or your application will be deemed deficient and will not be processed further.

(CONTINUED ON PAGE 2)

(cont'd) SOCIAL SECURITY NUMBER The following laws require that you furnish your Social Security Number to our agency:

FEDERAL LAWS:

42 U.S.C.A. §666(a)(13) requires the Social Security Number of any applicant for a professional license or occupational license be recorded on the application for license; and

if you are a licensed health care practitioner, **45 C.F.R., Part 61, Subpart B, §61.7** requires the Social Security Number as part of the mandatory reporting we must do to the Healthcare Integrity and Protection Data Bank (HIPDB), of any final adverse licensing action against a licensed health care practitioner.

HAWAII REVISED STATUTES ("HRS"):

§576D-13(j), HRS requires the Social Security Number of any applicant for a professional license or occupational license be recorded on the application for license; and

§436B-10(4), HRS which states that an applicant for license shall provide the applicant's Social Security Number if the licensing authority is authorized by federal law to require the disclosure (and by the federal cites shown above, we are authorized to require the Social Security Number).

FEES

Attach the \$50 non-refundable application fee for each application filed. Additional fees will be assessed after Board approval and passage of the examination. Make checks payable to: "COMMERCE AND CONSUMER AFFAIRS". (check must be in U.S. dollars and be from a U.S. financial institution.)

NOTE: One of the numerous legal requirements that you must meet in order for your new license to be issued is the payment of fees as set forth in this application. You may be sent a license certificate before the payment you sent us for your required fees is honored by your bank. If your payment is dishonored, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$25.00 service charge shall be assessed for payments that are dishonored for any reason.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

EXPERIENCE

A minimum of 4 years of supervisory experience within the past 10 years immediately preceding the filing of an application is required.

EXPERIENCE CERTIFICATES

<u>Submit</u> not less than 3 notarized certificates in support of supervisory experience <u>with application</u>. If applying for more than one classification, submit at least one experience certificate for each classification. (*No two certificates in the same classification shall be from the same person.*) Inform the person completing your experience certificate that they must describe in detail your experience performing on-site supervision and direction of employees in the classification you are applying for.

CHRONOLOGICAL HISTORY OF PROJECTS FORM ("PROJECT LIST")

Submit a Project List as documentation of the applicant's previous supervisory work experience. Use as many pages as necessary to verify your four (4) years of supervisory experience. The Project List may be duplicated and is available on the Contractor License Board's website at:

http://cca.hawaii.gov/pvl/boards/contractor/application_publication. Click on "Chronological History of Projects Form".

Submit a separate Project List **for each classification** the applicant intends to engage. Only include work experience performing on-site supervision and direction of employees.

Please ensure that the Project List is filled out completely (provide information in each column of the form) and that it includes the following:

- A description of your supervisory work experience performed in-house, with your own crew; and work or trades that were subcontracted to other contractors; and the means and methods of each project listed.
- The "Contract Amount" stated should be commensurate with information stated in the "Detailed Description of the Work You Supervised".
- The "Amount of Supervisory Experience" should only include the actual amount of time spent on-site supervising your own crew. Do not include time spent for design, ordering materials, scheduling of downtime for rain-outs or waiting for delivery of materials.

(CONTINUED ON PAGE 3)

CHRONOLOGICAL HISTORY OF PROJECTS FORM ("PROJECT LIST") cont'd

Applicants who possess licensed experience in another state should provide proof of licensure, but will still be required to submit not less than 3 certificates in support of supervisory experience and the Project List.

Certain technical training may be approved as acceptable experience, but in no case shall the training count for more than one year of experience.

ASBESTOS CONTRACTOR

RMEs applying to do asbestos application, enclosure, removal, encapsulation, renovation, repair, demolition or other disturbances of friable asbestos or asbestos containing material shall meet all requirements with the exception of experience.

In lieu of experience, the RME shall submit proof of successful completion of a 4-day Environmental Protection Agency (EPA) or Board approved asbestos training course within two years prior to filing the application.

CREDIT REPORT

<u>Submit</u> a current and complete credit report for each officer, partner, manager, or member, (from a credit reporting agency issued not more than 6 months ago) covering at least the previous 5 years. If a partner or member is a business entity, submit credit reports on the entity's officers or the business entity's credit report (i.e. Comprehensive Dun & Bradstreet report) covering at least the previous 5 years.

A complete credit report must contain, at minimum, detailed account information on each of your current and past debts, the status of those debts, whether you are current or delinquent in paying any of those debts, and the existence or not of any public records. A credit report that only provides a summary or a credit score is <u>not</u> a complete credit report. For more information on credit reports, please go to the Federal Trade Commission's website at: https://www.consumer.ftc.gov/articles/0155-free-credit-reports or go to www.ftc.gov and enter "credit report" in the search box.

RME/ENTITY APPOINTMENT

Contracting Entity not licensed in Hawaii:

Contracting entity must submit a Contractor Entity application.

Contracting Entity licensed in Hawaii:

Submit a letter confirming RME employment. IF the RME will be the RME for more than one contracting entity ("dual" status), submit documentation verifying one of the following requirements:

- 1) Common ownership if at least fifty-one percent of each contracting entity (Documentation of ownership includes, but is not limited to, tax returns (Schedule C or Form 1065 for LLCs, Schedule K-1 or Form 1125E for Corporations); Stock Certificates; Business Registration documents (for single member LLC's only); or Operating agreement.)
- 2) A contracting entity is a subsidiary or joint venture with the other contracting entity;
- 3) Direct immediate family relationship between the RME and the officers, directors, members, managers or partners of the other contracting entity; or
- 4) Direct immediate family relationship between the officers, directors, members, managers and partners of all contracting entities for which the individual acts as the RME.

LAWS & RULES

A copy of the Contractors laws and rules may be obtained by submitting a written request to: Contractors License Board, DCCA, P.O. Box 3469, Honolulu, Hawaii 96801. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act should be read in conjunction with the above Statutes.

The laws and rules are also available on our website at: **<u>cca.hawaii.gov/pvl</u>**. Click on "Contractors". Then click on "Statute/Rule Chapter" on the right.

BOARD'S ADDRESS

Mail the completed application, proper fee amount and other required documents to:

Contractors License Board DCCA, PVL Licensing Branch P.O. Box 3469 Honolulu, HI 96801 Deliver to office location at: 335 Merchant St., Room 301 Honolulu, HI 96813 Phone: (808) 586-3000

(CONTINUED ON PAGE 4)

OR

ABANDONMENT OF APPLICATION

Pursuant to HRS §436B-9, your application shall be considered abandoned and will be destroyed, if you fail to complete the license process within one year after filing an application or fail to take and pass the examination after becoming eligible to take the examination.

If an application is deemed abandoned, the applicant shall be required to reapply for licensure and comply with the licensing requirements at the time of the reapplication.

EXAMINATION

The contractors licensing examinations are administered by a professional testing service, Prometric.

Applicants, upon approval by the Board, will be provided with examination registration forms. Applicants must mail the registration forms, together with the appropriate examination fees, **directly** to Prometric. Phone: (808) 261-8182.

EXAMINATION DATES AND REGISTRATION DEADLINES ARE AVAILABLE ON THE CONTRACTOR'S WEBPAGE.

Applicant must pass a written examination covering the following:

PART I Business and law (A copy of the Contractors laws and rules may be obtained by submitting a written request to the: Contractors License Board, DCCA, P.O. Box 3469, Honolulu, HI 96801).

The laws and rules are also available on our website at: **cca.hawaii.gov/pvl**. Click on "Contractors".

NOTE: It is strongly suggested that applicants obtain a copy of the contractor's licensing law and rules.

PART II Trade (field knowledge in classification requested).

Recommended Study materials for the Part II examination may be obtained by calling Prometric at: (808) 261-8182. Some books are available at public libraries. Refer to the listing in the "Bulletin of Examination Information".

Questions regarding the examination, study material, or sitting for the exam in another state should be directed to the testing agency, Prometric. Phone: (808) 261-8182 or visit their website at: www.prometric.com/hawaii.

REQUESTS TO TAKE THE LICENSING EXAMINATION OUT-OF-STATE - Must be approved by the Board. Submit your written request along with your application in advance of the deadline date, to allow for sufficient processing time. Please be advised that you are responsible for any additional cost for this out-of-state testing accommodation and test locations are limited to sites at which the testing service has a secured office.

REQUESTS TO USE AN INTERPRETER - Must be approved by the Board. Form is available from website at: **cca.hawaii.gov/pvl** or contact Prometric at: (808) 261-8182. The fee for this service is \$100, added to your examination fee.

(CONTINUED ON PAGE 5)

LICENSE REQUIREMENTS

(Upon Passing the Exam)

FEES

License fees will be due. Specific amounts will be given at the appropriate time.

ATTENTION: CONTRACTORS APPLYING FOR ELECTRICAL OR PLUMBING RELATED CLASSIFICATIONS

Please be advised that in order to perform **electrical or plumbing** work in Hawaii, **an individual must also obtain an electrician (i.e. ES or EJ) or plumber (PM or PJ) license.** IF you are not licensed as an electrician or plumber in accordance with HRS Chapter 448E, the contractor entity (your employer) must employ a licensed electrician or plumber to actually perform the electrical or plumbing work. (Refer to Hawaii Revised Statutes, Section 444-9.5 and Chapter 448E). **YOU MAY NEED THIS TYPE OF LICENSE TO GET A BUILDING PERMIT.**

MAINTAINING THE LICENSE

MAINTAIN INSURANCE

Contracting entities must maintain continuous insurance coverage throughout licensure and keep on file in the Board's office evidence of such coverage.

Failure to maintain continuous liability and workers' compensation coverages causes automatic forfeiture of the contracting entity <u>and RME</u> license, and if continuous coverage is not reinstated within sixty (60) days, shall require the entity and RME to apply as a new applicant.

Please inform your insurance agent that using the Insurance Certificate Electronic Online Submittal System at: **pvl.ehawaii.gov/inikua** provides faster processing of your contractor insurance certificates.

ENTITY-RME DEPENDENCY

RMEs who leave an entity shall notify the Board within <u>sixty (60) days</u> and apply to become a contracting entity, obtain employment with another contracting entity or file an application to place the license on an inactive status within <u>ninety (90) days</u>. Failure to do so within the required time period will cause **automatic forfeiture** of the license.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, are subject to renewal by **September 30 of each even-numbered year**. To ensure receipt of a renewal application, keep the Board informed of your address. (RME renewal applications will be sent to the entity's address.) Applications are sent by mail before August 15, of each even-numbered year. Licenses not renewed by September 30 are forfeited and the holders of a forfeited license are considered unlicensed and may not practice. Restorations of forfeited licenses are accepted until November 30 of the even-numbered year with a penalty fee. After November 30, restoration is not accepted and a new application for a license is required.

(CONTINUED ON PAGE 6)

CLASSIFICATIONS AS LISTED IN CHAPTER 77

HAWAII ADMINISTRATIVE RULES

More information on the following classifications may be found at: **<u>cca.hawaii.gov/pvl/boards/contractor</u>**. Click on the link "Description of Contractor License Classifications".

| "A" | General Engineering |
|-------|---|
| "B" | General Building |
| C-1 | Acoustical and insulation contractor; |
| C-2 | Mechanical insulation contractor; |
| C-3 | Asphalt paving and surfacing contractor; |
| C-3a | Asphalt concrete patching, sealing, and striping contractor; |
| C-3b | Play court surfacing contractor; |
| C-4 | Boiler, hot-water heating, and steam fitting contractor; |
| C-5 | Cabinet, millwork, and carpentry remodeling and repairs contractor; |
| C-5a | Garage door and window shutters contractor; |
| C-5b | Siding application contractor; |
| C-6 | Carpentry framing contractor; |
| C-7 | Carpet laying contractor; |
| C-9 | Cesspool contractor; |
| C-10 | Scaffolding contractor; |
| C-12 | Drywall contractor; |
| C-13 | Electrical contractor; |
| C-14 | Sign contractor; |
| C-15 | Electronic systems contractor; |
| C-15a | Fire and burglar alarm contractor; |
| C-15b | Telecommunications contractor; |
| C-16 | Elevator contractor; |
| C-16a | Conveyor systems contractor; |
| C-17 | Excavating, grading, and trenching contractor; |
| C-19 | Asbestos contractor; |
| C-20 | Fire protection contractor; |
| C-20a | Fire repressant systems contractor; |
| C-21 | Flooring contractor; |
| C-22 | Glazing and tinting contractor; |
| C-22a | Glass tinting contractor; |
| C-23 | Gunite contractor; |
| C-24 | Building moving and wrecking contractor; |
| C-25 | Institutional and commercial equipment contractor; |
| C-27 | Landscaping contractor; |
| C-27a | Hydro mulching contractor; |
| C-27b | Tree trimming and removal contractor; |
| C-31 | Masonry contractor; |
| C-31a | Cement concrete contractor; |
| C-31b | Stone masonry contractor; |
| C-31c | Refractory contractor; |
| C-31d | Tuckpointing and caulking contractor; |
| C-31e | Concrete cutting, drilling, sawing, coring, and pressure grouting contractor; |
| C-32 | Ornamental, guardrail, and fencing contractor; |
| C-32a | Wood and vinyl fencing contractor; |
| C-33 | Painting and decorating contractor; |
| C-33a | Wall coverings contractor; |
| C-33b | Taping contractor; |
| C-33c | Surface treatment contractor; |

C-34

Soil stabilization contractor;

(CONTINUED ON PAGE 7)

- C-35 Pile driving, pile and caisson drilling, and foundation contractor;
- C-36 Plastering contractor;
- C-36a Lathing contractor;
- C-37 Plumbing contractor;
- C-37a Sewer and drain line contractor;
- C-37b Irrigation and lawn sprinkler systems contractor;
- C-37c Vacuum and air systems contractor;
- C-37d Water chlorination and sanitation contractor:
- C-37e Treatment and pumping facilities contractor;
- C-37f Fuel dispensing contractor;
- C-38 Post tensioning contractor;
- C-40 Refrigeration contractor;
- C-40a Prefabricated refrigerator panels contractor;
- C-41 Reinforcing steel contractor;
- C-42 Roofing contractor;
- C-42a Aluminum and other metal shingles contractor;
- C-42b Wood shingles and wood shakes contractor;
- C-42c Concrete and clay tile contractor;
- C-42e Urethane foam contractor;
- C-42q Roof coatings contractor;
- C-43 Sewer, sewage disposal, drain, and pipe laying contractor;
- C-43a Reconditioning and repairing pipeline contractor;
- C-44 Sheet metal contractor;
- C-44a Gutters contractor;
- C-44b Awnings and patio cover contractor;
- C-48 Structural steel contractor;
- C-48a Steel door contractor:
- C-49 Swimming pool contractor;
- C-49a Swimming pool service contractor;
- C-49b Hot tub and pool contractor;
- C-51 Tile contractor;
- C-51a Cultured marble contractor;
- C-51b Terrazo contractor;
- C-52 Ventilating and air conditioning contractor;
- C-53 Miscellaneous retail products;
- C-54 Interior design;
- C-55 Waterproofing contractor;
- C-56 Welding contractor;
- C-57 Well contractor;
- C-57a Pumps installation contractor;
- C-57b Injection well contractor;
- C-60 Solar power systems contractor;
- C-61 Solar energy systems contractor;
- C-61a Solar hot water systems contractor;
- C-61b Solar heating and cooling systems contractor;
- C-62 Pole and line contractor;
- C-62a Pole contractor,
- C-63 High voltage electrical contractor; and
- C-68 Classified specialist.

APPLICATION FOR CONTRACTOR'S LICENSE - RESPONSIBLE MANAGING EMPLOYEE

Access this form via website at: cca.hawaii.gov/pvl

State of Hawaii Dept. of Commerce and Consumer Affairs CONTRACTORS LICENSE BOARD 335 Merchant St., Room 301, PO Box 3469 Honolulu, HI 96801

| INSTR | UCTIONS - To avoid delay re | ead all instruction | ns carefully. | | License No. CT - | | Effective [| Date: |
|-----------------|--|----------------------|-----------------------------|----------|-------------------|------------|---------------------------------|----------------------|
| | applicable question must be for presentation is grounds for | | | >- | CLASS(ES): | | | |
| | n sheets to this application whe e answer is not sufficient. | en so instructed o | r where the space provided | USE ONLY | | | | |
| | er all questions. No license w leted. If a question is not app | | | BOARD U | | | | |
| Applic form. | cations must be printed legib | y in black ink or ty | pewritten with the fillable | FOR B | | | | |
| applic | quired \$50.00 application fe ation form. Make check paya must be in U.S. dollars and b | ole to: "Commerce | e and Consumer Affairs". | | | | | |
| A. N | Name of Applicant (<i>First, Middi</i> | e, Last): | | | | | | |
| B. N | lame of Contracting Entity yo | | | | | | | |
| | • License No.: | | OR • Da | ite app | olied for licen | se: | | |
| | Mailing Address: | | | | | | | |
| | | | (P.O. Box or Street ad | | • | ip Code) | | |
| | Social Security No.: | Phone No | . (days): | | Email: | | | |
| D. R | Residence Address: | | (Street address, C | ity Cta | to and 7in Code | -\ | | |
| E. S | et forth in detail the kind of c | ontracting busines | | | | | | |
| F. C | Classification(s) requested (| Symbol - see list | | | Name of clas | sification | | |
| G. E | DUCATION: Vocational Schoo | | ity, Special Training: | | | | Years | Months |
| _ | | | | | | | | |
| H. | Name of State | License No. | Date Issued | Cla | ssifications | | FOR OFFIC | E USE ONLY |
| L | SES - | | | | | | Cred | lit Report |
| <u>.</u> | N A IE LICENSES | | | | | | Expe | erience |
| L H | 4 H | | | | | | Entit | y Appointment |
| | Attach copy of each cont | ractor's license pre | eviously held in any state. | | | | | |
| | | | (CONTINUED ON PAGE | 2) | | | | |
| special | aterial can be made available for i needs. Please call the Licensing er at (808) 586-3000 to submit yo | Branch | Appl 115 | \$ 50 | RME: | CRF | 116. 117. 100. ge BCF. | \$ 74/\$148 \$ 30 |

| Prin | at Applicant Name: Date: | | | | | | |
|------|--|-----|-----|--|--|--|--|
| | (LAST, First, Middle) | | | | | | |
| l. | EACH QUESTION MUST BE ANSWERED | | | | | | |
| 1. | Are you at least 18 years of age? | YES | □NO | | | | |
| 2. | Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States? | YES | NO | | | | |
| 3. | Have you previously applied for a Hawaii State contractor's license? | YES | □NO | | | | |
| 4. | Have you ever been affiliated with a contracting entity whose license has been terminated due to issuance of a court order authorizing payment from the Contractors Recovery Fund of this state or any other state? | YES | □NO | | | | |
| | (If "Yes", submit a detailed statement giving the date of the order and circumstances leading up to issuance of the court order.) | | | | | | |
| 5. | Have you or any construction organization in which you were an officer, partner, manager or member had a contractor's license or any professional or vocational license denied, fined, suspended or revoked by this state | | | | | | |
| | or any other state? | YES | ∐ио | | | | |
| | (For the purpose of this question, "denied" does not mean that one has previously failed an examination.) | | | | | | |
| 6. | Has any bonding or surety company ever completed or made a financial settlement upon any construction contract or work undertaken by you or any construction organization in which you were an officer, partner, manager or member? | YES | □NO | | | | |
| | (If "Yes", attach a detailed statement signed by you.) | | | | | | |
| 7. | Are there now any unpaid past due bills or claims for labor, materials, or services, outstanding and unsatisfied, as a result of your operations or of any construction organization in which you were an officer, partner, manager or member? | YES | □NO | | | | |
| | (If "Yes", attach a detailed statement signed by you.) | | | | | | |
| 8. | Are there now any liens, suits, or judgments of record or pending, outstanding and unsatisfied, as a result of your operations or of any construction organization in which you were an officer, partner, manager or member? | YES | NO | | | | |
| | (If "Yes", attach a detailed statement signed by you explaining the circumstances and current status, and if no payment or payment arrangement has been made, the reason; a resume of employment and business activities; and copies of the court complaint, judgment, documentation of payment arrangements, lien documents, records of any payments, and other relevant documents.) | | | | | | |
| 9. | Have you or any construction organization in which you were an officer, partner, manager or member ever been adjudicated as bankrupt or is presently in the process of bankruptcy proceedings? | YES | □NO | | | | |
| | (If "Yes", attach a detailed statement giving the number of bankruptcy proceedings, the location of the bankruptcy court, a schedule of creditors listed in the bankruptcy petition, the approximate date of the action and a statement of the final action upon the proceedings.) | | | | | | |
| 10. | Have you or any construction organization in which you were an officer, partner, manager or member ever made an assignment of assets, either voluntary or otherwise, in settlement of construction obligations for less than the total amount of the indebtedness? (If "Yes", attach a detailed statement listing names and addresses of all creditors and losses they sustained.) | YES | □NO | | | | |
| 11. | Have you ever been convicted of a crime in any jurisdiction that has not been annulled or expunged? | YES | □NO | | | | |
| | (If "Yes", explain on a separate sheet the circumstances leading to the conviction and detailing all activities since the conviction, including employment and business involvements. Include job title, period of employment, employer's name, description of duties, and training attended. Also, submit court documentation on the date, place, violation of each conviction and fulfillment of conditions of each sentence.) | | | | | | |

(CONTINUED ON PAGE 3)

| Print Applicant Name: | | Date: | | |
|--|----------------------------------|---|--|--|
| (L | AST, First, Middle) | | | |
| J. | EXPERIENCE ST | ATEMENT | | |
| 1. TYPE OF WORK & TIME AT EACH - I have worked a Apprentice for | s a:mosmosmosmosmosmosmosmosmos. | 3. SKILLS - I can perform the following: Read a financial statement Compute payroll Balance a checking account Read blueprints Prepare job estimates Order materials Design & layout construction projects Other (specify): | | |
| 2. TOTAL TIME IN CONSTRUCTION:yrs | mos. | Other (specify): | | |
| | | | | |
| | | | | |
| | RIENCE FIRST: (AT | rach additional sheets if Necessary) | | |
| Name of Company L | icense No. | Describe duties and responsibilities: | | |
| Type of Business Company Engaged in | | | | |
| | | | | |
| Address of Company | | | | |
| | | | | |
| | | | | |
| | | - | | |
| Dates employed: to Tot Tot | al:Yr/Mo | - | | |
| Dates supervised: to Tot | al: | Hours worked per week: | | |
| No. of people supervised: | Yr/Mo | AVERAGE SIZE OF COMPLETED PROJECTS (Give square footage or anything that will describe physical dimension): | | |
| TYPE OF PROJECTS: | | | | |
| Apartments Office Buildings | | | | |
| Condominiums Remodeling | | AVERAGE GROSS DOLLAR VALUE OF COMPLETED PROJECTS: | | |
| Custom Tract Houses | | \$ | | |
| High Rise Other (specify): | | | | |

(CONTINUED ON PAGE 4)

| Print Applicant Name: | | Date: |
|--|---------------------------------|---|
| | (LAST, First, Middle) | |
| K. LIST THE MOST RECENT EXP | ERIENCE FIRST: (A) | TTACH ADDITIONAL SHEETS IF NECESSARY) |
| Name of Company | License No. | Describe duties and responsibilities: |
| Type of Business Company Engaged in | | |
| | | |
| Address of Company | | |
| | | |
| | | |
| Dates employed. | Total | T |
| Dates employed: to Mo/Yr | Yr/Mo | |
| Dates supervised: toMo/Yr | Total:Yr/Mo | Hours worked per week: |
| No. of people supervised: | .,, | AVERAGE SIZE OF COMPLETED PROJECTS (Give square footage or |
| TYPE OF PROJECTS: | | anything that will describe physical dimension): |
| Apartments Office Buildings | | |
| Condominiums Remodeling | | AVERAGE GROSS DOLLAR VALUE OF COMPLETED PROJECTS: |
| Custom Tract Houses | | |
| High Rise Other (specify): | | |
| | | |
| I understand that any misrepresentation is grounds Sections 436B-19 and 444-17), Hawaii Revised Statu | for refusal or subseque tes. | this application and in the documents attached are true and correct. ent revocation of license and is a misdemeanor (Section 710-1017, Revised Statutes, Chapter 444 and Hawaii Administrative Rules, |
| Signature of Applic | | |
| - | | |
| Print Name of Appli | cant | |
| Release of Information to Third Party: | | |
| To assist me in the licensing process, I hereby autho not limited to application status) to the following th | | ease any and all information regarding my application (including, but |
| Print name of Individual who is assisting you: | | |
| Name of Owner institut | | |
| | | |
| Signature of Applic | ant | Date |
| Supporting certificates necessary to establish that the to the application See instruction sheet. | ne applicant's construc | tion experience meets the minimum requirements must be attached |

Additional certificate forms may be obtained from the office of the Board at 335 Merchant Street, Room 301, Honolulu, HI 96813 or you may download forms from our website at: **cca.hawaii.gov/pvl**.

EXPERIENCE CERTIFICATE - CONTRACTOR'S LICENSE

Access this form via website at: **cca.hawaii.gov/pvl**

IMPORTANT!! READ "COMPLETION OF THIS EXPERIENCE CERTIFICATION" (page 3) BEFORE COMPLETING THIS CERTIFICATE.

| THIS SECTION TO BE COMPLETED | BY THE APPLICANT: | | | | | |
|---|---|--|--|--|--|--|
| Name of Applicant: (First, Middle, Last) | | | | | | |
| | | | | | | |
| Classification requesting (check one only | | | | | | |
| A - General Engineering | B - General Building C | | | | | |
| THIS SECTION TO BE COMPLETED | BY THE PERSON WHO WILL CERTIFY | TO THE APPLICANT'S EXPERIENCE: | | | | |
| Indicate your BUSINESS RELATIONSHIP to the applicant: | Employment Dates (mo/yr): From: To: | Indicate LEVEL applicant worked at: | | | | |
| | | JOURNEYMAN | | | | |
| EMPLOYER SUPERVISOR | Length of service: | FOREMAN SUPERVISOR | | | | |
| RME Lic. # | Yrsmos. | CONTRACTOR | | | | |
| Classifications held: | Dates applicant has supervised: | OTHER (specify): | | | | |
| | From: To: | | | | | |
| FELLOW EMPLOYEE | TOTAL TIME: | (Refer to the Board's definitions of each of the above levels | | | | |
| ☐ JOURNEYMAN | | on the "Completion of this Experience Certification" page.) | | | | |
| OTHER (specify): | FULL-TIME | Did the applicant demonstrate a level of knowledge and skill expected of a journeyman or better in the craft(s) of | | | | |
| | PART-TIME - Hours per week, if | trade(s) listed above? (Check your answer.) | | | | |
| | part-time | YES NO | | | | |
| | | Did the applicant demonstrate a history of honesty, truthfulness, financial integrity and fair dealing? | | | | |
| | | □YES □NO | | | | |
| DESCRIPE IN DETAIL THE ADDITION OF | VDEDIENCE DEDECORMING ON CITE CLIDEDVIC | CON AND DIRECTION OF FARD OVERS IN THE | | | | |
| | General Engineering, General Building, etc. | SION AND DIRECTION OF EMPLOYEES IN THE .): | | | | |
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(SIGNATURE REQUIRED ON PAGE 2 IN FRONT OF NOTARY)

| Print Name of Applicant: | Date: |
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| | Any person or his agent who files with the Contractors License Board any are not the contractors license law, which is false or untrue or contains any |
| Certification of Person Completing this form: | |
| l, | hereby certify that I have personally known the person |
| (Print name of certifier) named as applicant above; that I have direct knowledge of the applicant answers given here are true and correct. | olicant's supervisory experience which I have listed; and, all other statements |
| | Date: |
| Signature of the Certifier in front of Notary P | ublic |
| | |
| Print Your Name: | |
| Address of Certifier: | |
| Contractor's Lic. No. ENTITY: | |
| Licensed Classifications of Certifier: | State: |
| | Business Phone No.: () |
| | |
| | |
| Subscribed and sworn to before me thisday of A.D. 20 | |
| Notary Signature: | |
| Notary Public, State of: | |
| My commission expires: | |
| Print Name: | |
| | |
| Doc. Date: No. of Pages: | |
| Notary Name: Circuit Court: | |
| Doc. Description | |
| Notary Signature: | |
| Date: | |
| | |

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DIRECT KNOWLEDGE is knowledge of the truth in regard to a particular fact, which is original, and does not depend on information or hearsay.

The applicant is requesting that you complete this form to certify as to your DIRECT KNOWLEDGE of the applicant's experience. As a qualified and responsible person you must certify that the applicant demonstrated a level of knowledge and skill expected of a journeyman or better in the classification for which the application is being made by describing in detail the applicant's experience performing on-site supervision and direction of employees in the classification the applicant is applying for.

JOURNEYMAN is an experienced worker in the trade who is fully qualified as opposed to a trainee, and is able to perform the trade without supervision.

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IMPORTANT: You may be requested to provide documentation to verify all experience to which you are attesting. For your records, it is suggested that you keep a copy of the certificate you complete.

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EXPERIENCE CERTIFICATE - CONTRACTOR'S LICENSE

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| RME Lic. # | Yrsmos. | CONTRACTOR | | | | |
| Classifications held: | Dates applicant has supervised: | OTHER (specify): | | | | |
| | From: To: | | | | | |
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| | Date: |
| Signature of the Certifier in front of Notary P | ublic |
| | |
| Print Your Name: | |
| Address of Certifier: | |
| Contractor's Lic. No. ENTITY: | |
| Licensed Classifications of Certifier: | State: |
| | Business Phone No.: () |
| | |
| | |
| Subscribed and sworn to before me thisday of A.D. 20 | |
| Notary Signature: | |
| Notary Public, State of: | |
| My commission expires: | |
| Print Name: | |
| | |
| Doc. Date: No. of Pages: | |
| Notary Name: Circuit Court: | |
| Doc. Description | |
| Notary Signature: | |
| Date: | |
| | |

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| RME Lic. # | Yrsmos. | CONTRACTOR | | | | |
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| Signature of the Certifier in front of Notary P | ublic |
| | |
| Print Your Name: | |
| Address of Certifier: | |
| Contractor's Lic. No. ENTITY: | |
| Licensed Classifications of Certifier: | State: |
| | Business Phone No.: () |
| | |
| | |
| Subscribed and sworn to before me thisday of A.D. 20 | |
| Notary Signature: | |
| Notary Public, State of: | |
| My commission expires: | |
| Print Name: | |
| | |
| Doc. Date: No. of Pages: | |
| Notary Name: Circuit Court: | |
| Doc. Description | |
| Notary Signature: | |
| Date: | |
| | |

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IMPORTANT ANNOUNCEMENT ADDENDUM TO CONTRACTOR LICENSE APPLICATIONS

CONCERNING THE SUBMITTAL OF A

CHRONOLOGICAL HISTORY OF PROJECTS FORM

EFFECTIVE IMMEDIATELY

Every applicant for a RESPONSIBLE MANAGING EMPLOYEE (RME) or a SOLE PROPRIETOR contractor's license must submit a "**Chronological History of Projects Form**" ("Project List") as documentation of the applicant's previous supervisory work experience. Use as many pages as necessary to verify your four (4) years of supervisory experience. The Project List may be duplicated and is available on the Contractor License Board's website:

http://cca.hawaii.gov/pvl/boards/contractor/application_publication. Click on "Chronological History of Projects Form".

Submit a separate Project List **for each classification** the applicant intends to engage. Only include work experience performing on-site supervision and direction of employees.

Please ensure that the Project List is filled out completely (provide information in each column of the form) and that it includes the following:

- A description of your supervisory work experience performed in-house, with your own crew; and work or trades that were subcontracted to other contractors; and the means and methods of each project listed.
- The "Contract Amount" stated should be commensurate with information stated in the "Detailed Description of the Work You Supervised".
- The "Amount of Supervisory Experience" should only include the actual amount of time spent on-site supervising your own crew. Do not include time spent for design, ordering materials, scheduling or downtime for rain-outs or waiting for delivery of materials.

(CONTINUED ON NEXT PAGE)

NOTE: IF APPLYING FOR MORE THAN ONE CLASSIFICATION, SUBMIT A SEPARATE LIST FOR EACH.

| SA | M | IP | LE |
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| Classification requested* Check one only) | | | | | | |
|--|--|--|--|--|--|--|
| "A" General Engineering | | | | | | |
| "B" General Building | | | | | | |
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CHRONOLOGICAL HISTORY OF PROJECTS COMPLETED

| 1/12/14 | 6/22/14 | John Doe Residence 220 Palama Street, Honolulu | John Construction | "B" General Building C-17 | Foreman - 8 workers | New residence - supervised foundation, framing, roofing with own crew. Coordinated plumbing, electrical, and drywall subcontractors Detailed description: Construction of 90 site CMI/PCS network. Project consisted of excavating/trenching for installation of new conduit & manhole/vault systems. Grading of affected work areas to normal | \$200,000 | 5 months 6 months (Actual |
|---------|---------|---|-------------------------------------|---------------------------------------|--|---|-------------|--|
| 8/1/13 | 5/1/14 | J. Doe Communications, Honolulu, HI | Honolulu HI Excavating Inc. grading | Excavating, grading & trenching | Construction supervisor - 12 workers | conditions. Direct supervision of: installation of new communications conduits & manhole systems by in-house crews. Included excavation, trenching, directional drilling & surface restoration/grading (asphalt & concrete). | \$1,200,000 | supervisory time - not the time project is on the books) |

^{*}You must submit a separate list for each classification requested.

^{**}All information should be specific to the license classification you are applying for. As in the second example, if you are applying for a specialty classification, the contract amount and years/months of supervisory experience should be specific to that specialty, and not the entire construction project (project start and end dates).

| Please Print Name: | Classification requested* (Check one only) |
|--------------------|--|
| Entity: | ○ "A" General Engineering |
| RME: | ○ "B" General Building |
| Sole Owner: | ○ "C" |

CHRONOLOGICAL HISTORY OF PROJECTS COMPLETED

| Project Start Date | Project End Date | Project | Employer | Employer's Classification | Position Title (# of workers supervised) | Detailed Description of the Project and the Work You Supervised | Contract Amount** | Amount of Supervisory Experience** (yrs/months) |
|--------------------------|------------------------|---------|----------|------------------------------|--|---|----------------------|--|
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Pursuant to §436B-9, Hawaii Revised Statutes, your application shall be considered abandoned and shall be destroyed if you fail to provide evidence of continued efforts to complete the licensing process for two consecutive years. The failure to provide evidence of continued efforts includes, but is not limited to:

- (1) failure to submit any required information and documents requested by the licensing authority within two consecutive years from the last date the documents and information were requested, or
- (2) failure to complete any additional requirements for licensure that remain after approval of your application, such as attempting to complete an examination requirement, within two consecutive years from the date your application was approved, or
- (3) failure to provide the licensing authority with any written communication during two consecutive years indicating that you are attempting to complete the licensing process.

If an application is deemed abandoned, the applicant shall be required to reapply for licensure and comply with the licensing requirements in effect at the time of the reapplication.

Frequently Asked Questions regarding Abandoned Applications

- 1) Q: If after receiving my application the board or program requests additional information, how much time do I have to provide them with the requested information before my application is deemed abandoned?
 - A: You have two years from the date the information is requested.
- 2) Q: If I am an applicant who is required to take a licensing examination in order to complete the licensing process and my application to take the licensing examination is approved, how much time do I have to complete the examination requirement before my application is abandoned?
 - A: You must make an attempt to take the examination within two years from the date your application is approved.
- 3) Q: What is meant by "attempt to take the examination?"
 - A: You must register and take the examination.
- 4) Q: If the statutes or rules of the boards or programs do not set time limits on taking and passing the examination, and the only requirement left for me to become licensed is to pass the examination, and within the two year period I should fail the examination, re-register for the examination, but fail again, will my application be abandoned because I could not pass the examination within two years?
 - A: Your application will not be abandoned because you would have demonstrated your efforts to take the examination by registering for and taking the examination.

(NOTE: Our office will only be notified of your efforts if you take the examination as a Hawaii candidate. Examination results will not automatically be provided to our office if you sit for the examination via another state board. Therefore, if you are in this situation, please arrange for the test results to be sent to us).

- 5) Q: What does it mean if my application is abandoned?
 - A: It means that your application is no longer valid, will be destroyed, and you shall be required to reapply and comply with the requirements for licensure at the time of the reapplication. To reapply, you must submit a new application and you will be required to comply with the licensing requirements and pay fees that are in effect at the time you submit your new application.

- 6) Q: Will you be providing a notice to me before my application is abandoned?
 - A: It is not required that we notify you before your application is abandoned. However, some boards and programs have taken the initiative to send out notifications.
- 7) Q: Will any of the documents that supplemented my first application be saved in case I need to reapply?
 - A: No. When you reapply, you will need to again provide us with documentation.
- 8) Q: Will the application fee that I paid with my first application carry over to cover the application fee for my new application?
 - A: No. You will be required to again pay the non-refundable application fee.
- 9) Q: If my application has not been destroyed does this mean that it has not yet been deemed "abandoned?"
 - A: No. Simply because an application has not been destroyed does not mean that it has not been deemed abandoned.
- 10) Q: If I am currently unable to complete the licensing process (eg., no continued effort), how do I prevent my application from being abandoned?
 - A: You have two years to complete the licensing process. However, if you are unable to show continued effort for two consecutive years but you still intend to complete the licensing process, you must send a written communication to the board or program **prior** to the two year expiration explaining why you are unable to complete the licensing process within two years. Your written communication shall also request approval to complete the licensing process by a specific date after the two year expiration. You will be advised whether your request is approved or disapproved. If disapproved, your application will be destroyed and you will need to reapply for licensure.
- 11) Q: Who do I contact to find out if my application is soon to be abandoned?
 - A: You may contact the Licensing Branch at (808) 586-3000.