

OFFICE OF LICENSURE AND COMPLIANCE
SOUTH CAROLINA RESIDENTIAL BUILDERS COMMISSION
P O BOX 12517
COLUMBIA SC 29211-2517
(803) 896-4501 FAX (803) 896-4525

- CHANGE COMPANY NAME
- CHANGE HOME ADDRESS
- CHANGE BUSINESS ADDRESS
- CHANGE CLASSIFICATIONS

CHANGE OF INFORMATION FORM

*TO BE USED BY HOME BUILDER, SPECIALTY CONTRACTOR
AND HOME INSPECTOR*

FEEES
CHANGE ONLY – **NO FEE**
CHANGE AND DUPLICATE CARD -**\$10.00**
***PLEASE SUBMIT ORIGINAL CARD
ALONG WITH THE FEE TO RECEIVE
A DUPLICATE CARD.**

NAME LIC/REG # _____

PHONE NUMBER

CURRENT ADDRESS CITY STATE ZIP CODE

PREVIOUS ADDRESS CITY STATE ZIP CODE

CURRENT BUSINESS NAME CITY STATE ZIP CODE

PREVIOUS BUSINESS NAME CITY STATE ZIP CODE

SPECIALTY CONTRACTOR:

(CHECK NEW CLASSIFICATION AND LIST YEARS OF EXPERIENCE)

- 01- VINYL/ALUMINUM SIDING _____
- 02 – INSULATION INSTALLER _____
- 03 – ROOFING _____
- 04 – FLOOR COVERING _____
- 05 – MASONRY _____
- 06 – DRYWALL INSTALL/REPAIR _____
- 07 – CARPENTRY _____
- 08 – STUCCO INSTALLER _____
- 09 – PAINTER/WALLPAPER _____

Signature of Licensee/Specialty Contractor

Date