2009 RENEWAL APPLICATION

Instruction & Information Sheet

Please read before completing the application for renewal. If you have any question, please contact our office at 646-7262, 649-2211 or 649-9676.

DEFINITION OF LICENSE TYPES

SOLE PROPRIETOR LICENSE: A license issued to an individual who passed the examination and opened his or her own company. Sole proprietors are required to complete Parts I, II & III of the renewal application.

SOLE PROPRIETOR WITH RESPONSIBLE MANAGEMENT EMPLOYEE (RME) LICENSE: A license issued to an individual who opens his or her own company but hires another individual who passed the examination to represent his or her company as the RME. **Sole Proprietors with Responsible Management Employees are required to complete all parts of the renewal application.**

PARTNERSHIP LICENSE: A license issued to a company owned by two (2) or more individuals. All partnerships must be registered with the Department of Revenue and Taxation. The partnership must hire an individual who passed the examination to be the RME or one of the owners must pass the examination on behalf of the partnership. **Partnerships are required to complete Parts I, III & IV of the renewal application.**

CORPORATION LICENSE: A license issued to companies registered with the Department of Revenue and Taxation as a Corporation. Like partnerships, the corporation must hire an individual who passed the examination to be the RME or have one of the corporate officers pass the examination on behalf of the corporation. Corporations are required to complete Parts I, III & IV of the renewal application.

JOINT VENTURE LICENSE: A license issued when two (2) currently licensed companies work together. The joint venture may be for particular projects only or may be for all work undertaken by each company. **Joint Ventures are required to complete Parts I, III & IV of the renewal application.**

PART I – COMPANY INFORMATION

If your company has a fictitious name (**dba**) you must reflect the full name of the corporation on the application and it must be registered as well with the Department of Revenue and Taxation. **Example: XYZ Corporation (dba) Zee Construction Company.**

The classifications of a company are always the same as the classification of its responsible management employee. If a company has more than one (1) RME, then the company's classifications are a combination of all its RMEs classifications.

PART II -OWNER INFORMATION

Please ensure that all information is provided. If any information is a duplication of the company information "DO NOT USE".

PART III- QUESTIONS

All questions must be answered. Detailed statements must be attached to the renewal application for all questions with "yes" answer. Failure to answer may delay the process of your application.

PART IV- RESPONSIBLE MANAGEMENT EMPLOYEE (RME)

The license number of the RME is always different from the company's license number.

Exception: Sole Proprietor License.

Please ensure that all information pertaining to the RME is provided. Residential addresses should have a house number, street name, and village. Lot numbers will not be accepted as the residential address. In addition, residential phone numbers, cell numbers and pager numbers are also requested. Be assured that these numbers will be for the use of our Agency. Only information on the companies that the RME represents will be given to the general public.

AGENCY CLEARANCE FORM

Clearance from all agencies listed on the Agency Clearance Form is required. Failure to obtain complete clearances will delay the renewal process.

REQUIRED DOCUMENTS

Upon completion of the application and obtaining clearances, the following documents must be provided to our office in order to process your application. Please note that our office will not make copies. You must furnish our office with a copy of each of the following documents:

PROOF OF WORKERS COMPENSATION INSURANCE: Companies that have Employees, part-time or full-time, must obtain workers compensation insurance. In the Event that a corporate officer or partner is the RME of the company, workers compensation insurance for the RME is required if the RME does not own 51% or more of the company.

FINANCIAL STATEMENT: We will accept one of the following: **Balance Sheet** which would need to be signed by individual who prepared the document.

PROJECT LISTING: A complete listing of all projects, requiring a building permit, obtained between July 1, 2007 and June 30, 2008.

PHOTOS

Sole Proprietors: 1 each, 2X2, (**PASSPORT**) photo of the Owner Sole Proprietor w/RME: 1 each, 2X2, (**PASSPORT**) photo of the Owner and

Responsible Management Employee (RME)

Partnership or Corporation 1 each, 2X2, (**PASSPORT**) photo of the Responsible Management Employee (RME)

NOTE NO APPLICATIONS WILL BE ACCEPTED WITHOUT PHOTO (PASSPORT) **

PAYMENT

Payments will be made to TREASURER OF GUAM from 7:00 a.m. to 6:00 p.m. Receipts must be picked up first at CLB office.

CLB WILL CHARGE \$1.00 FOR EACH COPY MADE THROUGH THE OFFICE

FEE SCHEDULE LICENSE FEES FOR COMPLETED RENEWAL APPLICATIONS ARE PROCESSED BETWEEN APRIL 1, 2008 & JUNE 30, 2008

Sole Proprietors:	\$450.00	
Sole Proprietors w/RME:	\$900.00	(\$450.00 for each additional RME)
Partnership:	\$900.00	
Corporation w/ 1RME:	\$900.00	(\$450.00 for each additional RME)
Joint Venture:	\$900.00	

LICENSE FEES FOR COMPLETED RENEWAL APPLICATIONS PROCESSED AFTER JUNE 30, 2008

Sole Proprietors:	\$495.00	
Sole Proprietors w/RME:	\$990.00	(\$495.00 for each additional RME)
Partnerships:	\$990.00	
Corporations w/ 1RME:	\$990.00	(\$495.00 for each additional RME)
Joint Venture:	\$990.00	

All corporation, joint ventures, and partnerships must qualify or hire an individual as a Responsible Management Employee (RME)

Guam Contractors License Board 542 N. Marine Corp. Drive – A Tamuning, Guam 96913 646-7262;649-2211;649-9676;649-2210 (Fax) Application for Renewal- License Year 2009

L	Sole Proprietor – Complete Part I, II & III
[] Sole Proprietor w/RME-Complete All Parts
[] Partnership – Complete Part I, III & IV
[] Corporation – Complete Part I, III & IV
[] Joint Venture – Complete Part I, III & IV

PART I – COMPANY INFORMATION

** Name of Company			** Company License No. #	** GRT Number
			No. #	
** Mailing Address:				
** Office Phone	**Alternate Phone	** Fax	** Cell Phone	** E-Mail Address
** Office Location (Example: 123 S	S. Street Name, Tamuning	g, Guam) DO NOT US	E LOT NUMBER OF PO	OST OFFICE BOX ADDRESS
** Classification(s)				
PART II – OWNER	INFORMATION	(If company is	a Corneration Da	rtnership or Joint
Venture, DO NOT CO				
venture, bo Nor Co	WII LETE TIIIS S.	ECTION-GOL	IKECILI IOIF	an iii.
**Name of Owner		**Soc	ial Security Number	
**Residential Address (DO NOT USI	E LOT NUMBERS OR POST	OFFICE BOX- USE HO	OUSE NUMBER, STREET N	AME & VILLAGE)
**Home Phone	**Cell Phone	Pager		** E-Mail Address
	lentifying the tra	insaction, and		ANSWERED. Attach a des and addresses of the
1 . A (1	4 1. 211 1 . 2	f 1 - 1		
contract or work underta				s a result of any construction
contract of work underta	ken by you or the co	ompany :	[]	Yes [] No
2. Are there any liens su	its or judgments of	record pending	as a result of any co	onstruction contract or work
•	2. Are there any liens, suits, or judgments of record pending as a result of any construction contract or work undertaken by you or the company? [] Yes [] No			
undertaken by you or une	company.		[] .	[]110
3. Are there any judgmen	ts or admitted clain	ns against any bo	ond or cash deposit	required by Law, posted by
the company or owner or		2	•	Yes [] No
	. ,			
•				tion provided above and all
supplementary statements are true and correct. I/We also authorize the Contractors License Board to access,				
inquire or obtain information necessary in order to process my/our application for the purpose of obtaining a				
license from their office.				
Signature of Owner/Deutner/Com	orate Officer Data	Signature of O	wner/Partner/Corporate (Officer Date
Signature of Owner/Partner/Corp	orate Officer Date	Signature of OV	vner/rartner/Corporate C	Officer Date
Signature of Owner/Partner/Corpo	orate Officer Date	Signature of Ov	vner/Partner/Corporate C	Officer Date
Dienature of Owner/Larmer/Cold	vian Omini Dale	DIZHALUI C UI UV	menta an menteur pendie C	mici Dau

 $[\]ensuremath{^{**}}$ Required fields: Application will not be accepted without this information.

All corporations, joint ventures, and partnerships must qualify or hire an individual as a Responsible Management Employee (RME). The following section pertains to the individual who will serve as the RME.

PART IV- RESPONSIBLE MANAGEMENT EMPLOYEE (RME) INFORMATION.

(If there is more than one RME, please make a copy of this form)

** Name of Responsible Management Em	aployee (RME)	** RME's License No.	.# ** Social Security Number	
**Mailing Address				
** Residential Address (DO NOT USE LOVILLAGE)	OT NUMBER OR POST	OFFICE BOX ADDRES	SSES-USE HOUSE NUMBER, STREET NAME AND	
** Home Phone	** Cell Phone	Pager	** E-Mail Address	
** Classification(s)	1	1	<u>'</u>	
The signature below indicate individual as the RME of My/o			hereby appoints the above	
	Name of Company			
		Signature of Owr	ner/Partner/Corporate Officer Date	
company stated above. I u	nderstand my du progress to ensure	ties include super	agement Employee (RME) for the rvising personnel on construction, a the plans, specifications, building	
dissociation, upon resignation (ies) listed below. Furtherm	on or termination ore, I declare, un	as the RME of the der penalty or perj	d with a written notification of my e above company, or the company jury under the laws of the Laws of in this application, are true and	
In addition to the company a	bove, I am currer	ntly the RME for the	he following company (ies).	
**Company				
**Company				
		Signature of F	Responsible Management Employee Date	

^{**} Required fields: Application will not be accepted without this information.

** Company Name	** Social Security or Employment Identification Number (EIN)
** Name of Owner or RME	** GRT Number:

YOU MUST OBTAIN CLEARANCES FROM EACH OF THE DEPARTMENTS AND SECTIONS LISTED BELOW. IF STAMPS ARE INCOMPLETE, THE APPLICATION PROCESS MAY BE DELAYED.

<u>DEPARTMENT OF REVENUE AND TAXATION</u>
<u>BUSINESS LICENSE SECTION GRT SECTION INCOME TAX SECTION COLLECTION</u>

DEPARTMENT OF LABOR
OSHA ON-SITE BUREAU OF LABOR STATISTICS WAGE & HOUR WORKER'S COMPENSATION

DEPT. OF LAND MANGMENTDEPT. OF PUB WORK
BUILDING PERMITSDEPT. OF PUBLIC HEALTH
(ONLY FOR H-2 BARRACKS)PEALS BOARD
(AClass Only)

^{**} Required fields: Application will not be accepted without this information.

ZONE CLEARANCE FOR CONTRACTORS LICENSE

(To be attached to contractor's license application)

THIS FORM MUST BE COMPLETED IN ORDER TO OBTAIN A CLEARANCE FROM THE DEPARTMENT OF LAND MANAGEMENT. IF YOU ARE LEASING, RENTING OR USING A LOCATION FOR OFFICE, BARRACKS, EQUIPMENT AND STORAGE YARD OR STORAGE OF CONSTRUCTION MATERIALS, PLEASE ATTACH ALL OF THE REQUIRED DOCUMENTS AS SHOWN ON BACK OF THIS FORM.

COMPAN	Y NAME:	
1. OFFICE LOCATIO	N:	
Lot No:		Block Number:
Tract No:		Municipality:
2. BARRACKS: Number of Alien Emp	oloyees: If mor	re the five (5), where are they being housed?
Lot No:		Block Number:
Tract No:		Municipality:
	STORAGE YARD: equipment? () Yes parked or stored when n	
Tract No:	Municipality:	
4. STORAGE OF	CONSTRUCTION MA	ATERIALS:
Lot No:		Block Number:
Tract No:		Municipality:
I certify that the above	information is true and	l correct.
Name (Print)	Name (Signati	ure) — Date



RIA'S CONSTRUCTION COMPANY FINANCIAL STATEMENT

	ASSETS		
Current Assets:			
Cash in Bank	\$6,000.00		
Cash on Hand	\$1,800.00		
		\$7,800.00	
Fixed Asset:			
1990 Toyota Pick Up	\$700.00		
1990 Volkswagen Van	\$900.00		
1994 Nissan Pick Up	\$1,200.00		
1994 Ford Granada	\$4,500.00		
House & Lot (Sinajana)	\$75,000.00		
House & Lot (Tamuning)	\$90,000.00		
Appliances	\$7,000.00	<u>\$254,300.00</u>	
TOTAL ASSETS		\$262,100.00	
LIABILITI	ES & PROPRIETOR	SHIP	
Current Liabilities			
Accounts Payable	\$1,200.00		
Bank Payables	\$1,218.00		
Dank I dyables	Ψ1,210.00	\$2,418.00	
Proprietorship	\$259,682.00	\$259,682.00	
Total Liabilities & Proprietors	\$262,100.00		
This is to contifu that the above info			
This is to certify that the above information is true and correct.			
Signature of Owner or Managing A	gent	Date	