

Package Control Sheet

Prepared For: 

Order # 13127

Package # 19025

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Ship Via: USPS Certified Mail

Notes

Ship To:
South Carolina Residential Builders Dept
P. O. Box 12517

Columbia, SC 29211

Package Contents
Cover Letter

Residential Specialty Contractor Application

Attachment: Bond

Attachment: Letters of Reference

Attachment: Drivers License

Residential Specialty Contractor Application - Check (\$50.00)

Number Of Forms:	1
Total Payment Amt:	50.00
Total Pages:	11

October 12, 2010

SC Department of Labor, Licensing and Regulation
Residential Builders Commission
PO Box 12517
Columbia, SC 29211-2517

Re: [REDACTED]

To Whom It May Concern:

Enclosed please find a **Residential Specialty Contractor Application** for the State of South Carolina that was completed for our customer, [REDACTED]

Once the application has been approved, please forward evidence of the approval to:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

If there is any issue with the application, or if you require any further information, kindly contact us at the number or address listed below.

Thank you,

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION

**Residential Builders Commission
Office of Licensure and Compliance**

P. O. Box 12517, Columbia, SC 29211-2517
Synergy Business Park, Kingstree Bldg., 110 Centerview Drive
Telephone (803)896-4696 Fax (803)896-4525

RESIDENTIAL SPECIALTY CONTRACTOR APPLICATION

REGISTRATION FEES
(CERTIFIED CHECK OR MONEY ORDER ONLY)

FOR

OFFICE USE ONLY

All Registrations renew odd years, 2009, 2011, 2013.
\$100 If the license is issued for more than 12 months, before the next renewal date.
\$50 If the license is issued for 12 months or less, before the next renewal date.

LICENSE		
FISCAL		
CC		
ACTION		
APPROVAL		

A. APPLICANT INFORMATION (Please Print)

Applicant: _____
 Last _____ First _____ MI _____
 Date of Birth: 02/05/1985
 Business Name: _____
 Address: _____ GA _____ County: Gwinnett
 Street/P.O. Box _____ City _____ State _____ Zip _____
 Phone: (____) _____ Fax: (____) _____
 Home Address: _____ GA _____
 Street _____ City _____ State _____ Zip _____
 Phone: (____) _____

B. Answer the following questions

1. Have you ever been denied a license to practice in any of the homebuilding specialties checked or any similar occupational or professional license? ____ Yes ☒ No
2. Have you ever been convicted of, pled guilty or nolo contendere to a criminal offense (other than minor traffic violations)? ____ Yes ☒ No
3. Are you currently licensed as a home builder, specialty contractor in any other state? ____ Yes ☒ No If yes, which state(s) _____
4. Have there been any judgements, liens or claims filed against you or business entities you have are associated with in the past 5 years? ____ Yes ☒ No
5. Are you currently delinquent with child support obligations? ____ Yes ☒ No

(If your answer to any of these questions is yes, please explain on a supplemental sheet)

C. Please check the classifications below in which you wish to be registered

(DO NOT CHECK MORE THAN (3) THREE)

- | | |
|---|---|
| <input type="checkbox"/> 01 - VINYL/ALUMINUM SIDING | <input type="checkbox"/> 06 - DRYWALL HANGER |
| <input type="checkbox"/> 02 - INSULATION INSTALLER | <input type="checkbox"/> 07 - CARPENTER |
| <input checked="" type="checkbox"/> 03 - ROOFING | <input type="checkbox"/> 08 - STUCCO INSTALLER |
| <input type="checkbox"/> 04 - FLOORING COVERING | <input checked="" type="checkbox"/> 09 - PAINTER/WALL PAPER |
| <input type="checkbox"/> 05 - MASONRY | |

D. SIGNATURES

I certify that all statements contained herein are true and correct to the best of my knowledge. I further understand that false or incorrect information provided by me may result in the cancellation of any registration issued pursuant to this application and the institution of appropriate civil and criminal proceedings.

Signature of Applicant

Owner

Title

Date

10/7/10

Sworn and Subscribed before me this 7th day of October, 2010 year

Notary Public

NOTARY PUBLIC, GWINNETT COUNTY, GEORGIA
MY COMMISSION EXPIRES APRIL 8, 2013

April 8, 2013
My Commission Expires

NOTES

1. Be sure to check only the three classifications you wish to register. If you wish to work in more than three classifications you must obtain a residential homebuilders license.
2. Be sure to complete and attach the affidavit of work experience
3. Attach your signed, original surety bond if any job or contract will exceed \$5000.00.
4. Registrations expire on June 30 regardless of date issued.
5. It is the registrant's responsibility to notify this office on any change of address or company name.

GENERAL INFORMATION

1. Registration with the South Carolina Residential Builders Commission is required when the cost of any single job exceeds \$200.00.
2. Pursuant to Section 40-59-250: (A) Any person making an initial application to the Commission for licensure as a residential builder or registration as a residential specialty contractor shall first submit to a credit report.
3. Pursuant to Section 40-59-240: (D) When the cost of an undertaking performed by a residential specialty contractor for an individual property owner exceeds five thousand dollars (\$5,000), the residential specialty contractor must obtain an executed bond with a surety in the amount approved by the Commission. This bond must be in the name of the specialty registrant, not the company and in the amount of \$5000.00.
4. An applicant for registration as a residential specialty contractor must submit an affidavit of work experience or resume of his work history and experience as referred to by Section 40-59-240 (B) of the South Carolina Code.

Personal information provided in this application may be subject to public scrutiny or release under the S.C. Freedom of Information Act or other provisions of federal and state law.

*The disclosure of the social security number for identification purposes is authorized and mandated by state and federal statutes. The social security number is not subject to disclosure as public information.

AFFIDAVIT OF WORK EXPERIENCE

CHECK BELOW THE CLASSIFICATION(S) IN WHICH YOU WISH TO BECOME REGISTERED AND INDICATE IN THE SPACE PROVIDED THE NUMBER OF YEARS EXPERIENCE YOU HAVE ACQUIRED IN EACH CLASSIFICATION.

PLEASE SUBMIT 3 WRITTEN LETTERS OF REFERENCES ON YOUR WORK EXPERIENCE. (Personal, Supplier, or Other)

- () 01 - VINYL/ALUMINUM SIDING _____ YEARS
- () 02 - INSULATION INSTALLER _____ YEARS
- (✓) 03 - ROOFING 3 YEARS
- () 04 - FLOOR COVERING _____ YEARS
- () 05 - MASONRY _____ YEARS
- () 06 - DRYWALL HANGER _____ YEARS
- () 07 - CARPENTER _____ YEARS
- () 08 - STUCCO INSTALLER _____ YEARS
- (✓) 09 - PAINTER/WALL PAPER 3 YEARS

I CERTIFY THE NUMBER OF YEARS EXPERIENCE I HAVE INDICATES IN EACH CLASSIFICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DATE 10/7/2010 SIGNATURE [Signature]
PRINT NAME [Name]

AFFIDAVIT OF ELIGIBILITY

Pursuant to Section 8-29-10 SC Code of Law, **ALL** applicants for a South Carolina license after July 1, 2008 are required to complete and sign this Affidavit of Eligibility.

Section A: LAWFUL PRESENCE in the United States.

I, (please print your full name) XXXXXXXXXXXXXXXXXXXX, swear or affirm under penalty of perjury under the laws of the State of South Carolina that (check 1, 2 or 3 below):

1. ☒ I am a United States citizen or legal permanent resident eighteen years of age or older; or
2. ☐ I am not a US citizen but am lawfully present in the US as evidenced by one of the following
 - a. ☐ I am a qualified alien as defined in 8 U.S.C. sec 1641, eighteen years of age or older.
 - b. ☐ I am a nonimmigrant under the "Immigration and Nationality Act," Federal Public Law 882-414 as amended, eighteen years of age or older.
3. ☐ I am not physically present in the US under 8 U.S.C. sec 1621 (c) (2) (c) or employed in the US pursuant to 8 U.S.C. 1621 (c) (2) (a) (check either a or b below):
 - a. ☐ I am a US citizen, not physically present or employed in the United States.
 - b. ☐ I am a Foreign National, not physically present or employed in the United States.

If you selected either 3.a. or 3.b., you do not need to complete Section B. Skip to Section C.

Section B: Secure and Verifiable Document. This section must be completed if you checked number 1 or 2 in Section A.

1. Please check one of the following acceptable secure and verifiable documents. Complete documentation must be provided **upon request only**.

- ☐ Any South Carolina Driver License, South Carolina Driver Permit or South Carolina Identification Card, expired less than one year.
- ☒ Out-of-state issued photo Driver's License or photo identification card, photo driver's permit expired less than one year. State: Georgia
- ☐ Valid Temporary Resident Card
- ☐ Certificate of Naturalization with intact photo
- ☐ Certificate of (US) Citizenship with intact photo
- ☐ Other: (Name of verifiable document)
XXXXXXXXXXXXXXXXXXXX

2. Enter the state or the federal agency name where this secure and verifiable document was issued.

Georgia Department of Motor Vehicles

(If issued by a state agency, include both the state and agency name.)

3. What is the secure and verifiable document number?

XXXXXXXXXXXX


_____/_____/_____
Social Security Number

4. What is the expiration date of your secure and verifiable document? 2 / 5 / 2011
(month/day/year)

(If you hold a document without an expiration date, such as a military ID or naturalization certificate,
write
N/A.)

Section C: Attestation.

- I understand that this sworn statement is required by law because I have applied for or hold a professional or commercial license regulated by 8 U.S.C. sec. 1621. I understand that state law requires me to provide proof that I am lawfully present in the United States. I may also be required to provide proof of lawful presence.
- I understand that in accordance with section 8-29-10 false statements made herein are punishable by law. I state under penalty of perjury that the above statements are true and correct.
- I am the person identified above and the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension or revocation of a license, certificate, registration or permit.
- I understand that the above information must be disclosed to the Department of Labor, Licensing and Regulation upon request and is subject to verification.



Signature

Date 10/7/2010

Please print your name as shown on your secure and verifiable document.

Professional License Type: Residential Specialty Contractor

License Number (if already licensed): N/A

The South Carolina Code of Laws requires that every individual who applies for an occupational or professional license provide a social security or alien identification number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databases established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

LICENSE BOND

BOND NUMBER: B 1

KNOW ALL MEN BY THESE PRESENTS that we

_____, as Principal, and
_____, a Surety Company
authorized to do business in the State of South Carolina, as Surety, are held and firmly bound unto the
South Carolina Residential Builders Commission, State of South Carolina, as obligee in the sum of
Ten Thousand Dollars (\$10,000.00) lawful money of the United States of America. We bind
ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by
these presents.

WHEREAS, the above bonded Principal has applied to the South Carolina Residential Builders
Commission pursuant to Section 40-59-10 *et seq.* of the 1976 Code of Laws of South Carolina, as
amended (the Act), to be granted an authorization to engage in residential construction as a
Residential Builder (\$15,000) ☒ Licensed Residential Specialty Contractor (HVAC,
plumber, or electrician) (\$10,000) Registered Residential Specialty Contractor (\$5,000);
and

WHEREAS, the above bonded Principal is required in Section 40-59-220 of the Act to furnish
the Commission with a good and sufficient surety bond as one method of complying with one of the
conditions upon which the authorization is granted.

NOW, THEREFORE, the condition of this bond is such that if the above bonded Principal shall
in all respects comply with the rules and regulations pertaining to Residential Construction Standards and
Health and Safety requirements in this state, then this obligation shall be void; otherwise it is to remain in
full force and effect.

This bond is in full force and effect as to the above statutory and regulatory obligations of the
Principal for the license term of 9/24/2010 through 9/24/2011 unless renewed by
continuation certificate; however, the Surety shall have the right to cancel this bond at any time by filing
written notice with the South Carolina Residential Builders Commission of its intention to so cancel,
giving at least thirty (30) days notice prior to the effective date of the cancellation. This provision,
however, shall not operate to relieve, release or discharge the Surety from any liability already accrued or
which shall accrue before the expiration of the thirty (30) day period.

Regardless of the number of years this bond may remain in force or the number of claims against
this bond, the liability of the Surety shall not be cumulative and the aggregate liability of the Surety for
any and all claims, suits or actions under this bond shall not exceed the sum of Ten Thousand
Dollars (\$10,000.00) for any license year.

Claims may be initiated only through authorization by the Commission which must validate the
claim and determine the amount of loss or damage. No complaint may be maintained to enforce any
liability on this bond unless brought within eight (8) years after the event giving rise to the cause of
action. No right of action shall accrue upon or by reason of this bond to or for the use or benefit of
anyone whatsoever other than the Commission.

Witness our hands and seal this 24 day of September, 2010.

Name of Surety Company (Print)

Name of Principal (Print)

By: _____
Signature of Surety (Attorney-in-Fact)

By: _____
Signature of Principal

Approved SCRBC 2-9-05
Rev. effective 7/1/05



POWER OF ATTORNEY

Specialty Contractor License

_____, a New Jersey corporation having its principal office at _____, in _____, State of New Jersey ("____"), pursuant to Article VII, Section 1 of its By-Laws, which state in pertinent part:

The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

does hereby appoint _____

, its true and lawful attorney(s)-in-fact, full authority to execute on _____'s behalf fidelity and surety bonds or undertakings and other documents of a similar character issued by _____ in the course of its business, and to bind _____ thereby as fully as if such instruments had been duly executed by _____'s regularly elected officers at its principal office, in amounts or penalties not exceeding the sum of: **Ten Thousand Dollars (\$10,000.00)**

Signed this 27th day of September, 2010.

By:

Its Senior Vice President



STATE OF NEW JERSEY :

:ss. _____

COUNTY OF SUSSEX :

On this 27th day of September, 2010, before me, the undersigned officer, personally appeared _____, who acknowledged himself to be the Senior Vice President of _____, and that he, as _____, President, being authorized so to do, executed the foregoing instrument for the purposes therein contained, signing the name of the corporation by himself as Senior Vice President and that the same was his free act and deed and the free act and deed of _____.

NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES 12/12/2012

Notary Public

Bond No. B 1089686

The power of attorney is signed and sealed by facsimile under and by the authority of the following Resolution of the Board of Directors of _____ at a meeting duly called and held on the 6th of February 1987, to wit:

"RESOLVED, the Board of Directors of _____ authorizes and approves the use of a facsimile corporate seal, facsimile signatures of corporate officers and notarial acknowledgements thereof on powers of attorney for the execution of bonds, recognizances, contracts of indemnity and other writing obligatory in the nature of a bond, recognizance or conditional undertaking."

CERTIFICATION

I do hereby certify as _____'s Corporate Secretary that the foregoing extract of _____'s By-Laws and Resolution is in full force and effect and this Power of Attorney issued pursuant to and in accordance with the By-Laws is valid.

Signed this 27th day of September, 2010



A Corporate Secretary

Important Notice: If the bond number embedded within the Notary Seal does not match the number in the upper right-hand corner of this Power of Attorney, contact us at _____

USA
Georgia

DRIVER'S LICENSE

None, Large Sample 12/31/06

None, Large Sample

DL NO **100000001** DOB **12/31/1968**
CLASS **C** EXP **07/01/2011**
IMA, GEORGIA
SAMPLE

1234 ANY ST.
ANY TOWN, GA 33333
FULTON
Restrictions **A** End **NONE**
Iss **07/01/2006**

Sex **M** Eyes **BLU**
Hgt **5-07** Wgt **130**

None, Large Sample DD 12345678901234567890ABCDE



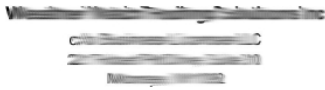


To Whom It May Concern;

I have known [REDACTED] and have been doing business with him and his company for a three years now he is an upstanding business man good to his word and always been an exceptional customer and friend. I highly recommend him and his company whenever I can he demonstrates integrity with everything he does.

Respectfully,

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]



02/11/2011

SC Residential Business Commission

50.00

Fifty Dollars and Zero Cents

Residential Specialty Contractor Registration Fee