



Oregon Landscape Contractors Board

2111 Front St NE; Ste 2-101

Salem, OR 97301

503-967-6291

503-967-6298 fax

LANDSCAPE CONSTRUCTION PROFESSIONAL INACTIVE LICENSE STATUS REQUEST FORM

There is a \$50 fee to change a license from active to inactive status at any time other than renewal.

I am requesting the Landscape Contractors Board (LCB) place my landscape contractor license on inactive status per ORS671. I understand that I must abide by the following:

1. I understand the license remains subject to LCB jurisdiction;
2. I understand I must notify the LCB of a change of address within 10 days of the change (\$200 fine for not doing so);
3. I understand the license fee must be received on or before the expiration date of this license;
4. In the event that the contractor wishes to reapply for an active license to perform landscape contracting work, I understand I will be required to meet all requirements of ORS Chapter 671 and OAR Chapter 808 and make such request in writing to the LCB;
5. I understand this inactive status request is only effective upon acceptance by the LCB; and
6. I understand that if the license was subject to discipline or probation by the LCB, I must satisfy any conditions imposed by the LCB as a result of the discipline or probation.

I understand and agree to abide by the above requirements. Please place my landscape construction professional license on inactive status.

Signature of Landscape Construction Professional

Date

Printed Name of Landscape Construction Professional

License Number (5-digits)

PAYMENT INFORMATION

You may send a check for \$50 when you mail this form or submit a credit card payment.

Visa MasterCard Amt. of Payment \$50

Account # _____ CVC# _____ Exp. Date _____

Signature _____

Name on Card _____

You may fax, email or mail this form to:
LCB • 2111 Front St. NE; Suite 2-101 • Salem, OR 97301
Fax 503-967-6298
LCBinfo@lcb.state.or.us