

CONSTRUCTION CONTRACTORS BOARD

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www.oregon.gov



TERMINATION REQUEST FORM

Business Entity Name	CCB License No.
The license is being terminated for the following reason:	
☐ Change of entity	
☐ Dissolution of the business	
Owner is deceasedPlease submit the certificate of death	
Terminate the LBPR license associated to this entityPlease submit a Lead-Based Paint application	for the new entity, if applicable
Other reason(s):	
Terminate the above license effective the date this document is indicated below:	
Effective Date of Termination:	
☐ Terminate when my new CCB license is active	
I understand that the above entity will no longer be licensed in the following conditions:	he State of Oregon and will comply with
1. This entity will not engage in construction work.	
2. This entity will not offer to undertake work, advertis construction work, obtain a building permit or perform	
By signing below, I certify that I have read the above and will corpossible civil penalties up to \$5,000.	mply with each requirement or face
Person making request	er, officer, member, or trustee)
Signature (Sole proprietor, partner, officer, member, or trustee)	 Date