

# APPLICATION FOR BUSINESS: CERTIFIED LEAD BASED PAINT RENOVATION CONTRACTORS LICENSE



Construction Contractors Board  
 PO Box 14140  
 700 Summer St. NE, Suite 300  
 Salem, OR 97309-5052  
 503-378-4621     [www.oregon.gov/ccb](http://www.oregon.gov/ccb)

<i>LBPR #</i> _____
<i>Eff. date</i> _____ <i>(Do not write in this box.)</i>

**IMPORTANT: THIS IS FOR NEW LICENSES ONLY. IT IS NOT FOR USE AS A RENEWAL FORM.**

**APPLICANT INFORMATION: (Please type or print neatly using blue or black ink).**

Full Legal Name of Sole Proprietor, Partnership, Corporation or LLC		CCB License No.
Business Mailing Address		City, State
Zip Code		
Telephone Number (     )	Cell Phone Number (     )	E-Mail Address
Full Legal Name of Partner, General Partner, Corporate Officer or LLC Member		Full Legal Name of Partner, General Partner, Corporate Officer or LLC Member
Full Legal Name of Partner, General Partner, Corporate Officer or LLC Member		Full Legal Name of Partner, General Partner, Corporate Officer or LLC Member

*Attach an additional page to list all names of partners, general partners, corporate officers or LLC members.*

**RRP HOLDER**

Full Legal Name of Renovation, Repair & Painting (RRP) Certificate Holder		<input type="checkbox"/> Owner <input type="checkbox"/> Employee	RRP Certificate No.
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**SIGNATURE**

I certify that I have read and will comply with ORS 431.920, ORS 701.505 to 701.515 (as amended by Oregon Laws 2009, chapter 757), and the rules adopted pursuant thereto. I also certify that the information and documentation given in this application is complete and accurate to the best of my knowledge.

Signature of Sole Proprietor, Partner, General Partner, Corporate Officer or Member	Date
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**INCLUDE WITH APPLICATION**

- Copy of employee or owner's Renovation, Repair & Painting (RRP) Certificate
- Fee - \$50 (make checks payable to the Construction Contractors Board)

**CREDIT CARD PAYMENTS - (Credit card-only customers may fax this application to 503-373-2155)**

Billing Name		Billing Address	
Amount of Payment <b>\$50</b>	Card Number	Expiration Date	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover	Signature of Card Holder _____		Date _____
			Office Use Only

**INSTRUCTIONS FOR COMPLETING THE  
APPLICATION FOR BUSINESS:  
CERTIFIED LEAD BASED PAINT RENOVATION  
CONTRACTORS LICENSE**

This form is **NOT** for use as a renewal form. It is for new applicants only.

You must have a current and active CCB license to apply. The information you supply must match what is currently listed on your CCB license.

**APPLICANT INFORMATION:**

Full Legal Name of Sole Proprietor, Partnership, Corporation or LLC:

Enter the name of the entity as listed on your CCB License. Do not include Assumed Business names here.

Business Mailing Address, Telephone, Cell phone and e-mail address:

Enter your business mailing address. If this has changed please submit a "Request to Change Address or Assumed Business Name or Business Entity Name Amendment" form.

Full Legal Name of Partner, General Partner, Corporate Officer or LLC Member (if not a Sole Proprietor):

Provide names of all owners as listed on your current CCB License. If officers / members have changed please submit a "Request to Change Personnel" form and include a copy of your company minutes. (If you are a partnership/joint venture, limited partnership or a limited liability partnership, a new license application is required if the partners have changed.)

**RRP HOLDER INFORMATION:**

Full Legal Name of Renovation, Repair & Painting (RRP) Certificate Holder:

List the full legal name of the individual certificate holder. Identify if they are an owner or an employee and list the RRP Certificate Number. (A corporate officer is an owner.) Only one RRP certificate holder is required. Please do not list more than one.

**SIGNATURE:**

Application must be signed by Sole Proprietor, Partner, General Partner, Corporate Officer or Member (not RRP Certificate holder).

**INCLUDE:**

Copy of Employee or owners Renovation, Repair & Painting (RRP) Certificate:

This is the certificate from an approved provider and has a photo and a certificate number. The certificate may be a paper one or a laminated card. If you have the card style, please submit a copy of both sides of the card. The Environmental Protection Agency (EPA) Firm Certification Certificate is not valid in the State of Oregon and does not qualify for the Oregon Certified Lead Based Paint Contractors License. For information on classes please contact either the EPA or Department of Human Services Health Division (DHS).

Fee:

Required \$50 fee