



CONSTRUCTION CONTRACTORS BOARD

P.O. Box 14140 Salem OR, 97309-5052
Phone (503) 378-4621 | Fax (503) 373-2155
www.oregon.gov/ccb



INDIVIDUAL NAME CHANGE REQUEST FORM

NAME AND LICENSE NUMBER

Business Entity Name

CCB License Number

Name (as currently registered with the Board)

Phone Number

Email Address

INDIVIDUAL NAME CHANGE

Sole Proprietor, Limited Liability Partner (LLP), Limited Partnership (LP), or Partnership:

If the CCB does not receive all of the following, we cannot process your name change request:

- Legal documentation supporting the change of your individual name (i.e., marriage license, signed Order of legal name change, etc.)
- I have updated my registry with the Oregon Secretary of State *(if applicable)*
- Updated Insurance and Bond certificate(s) in the new legal name

NEW First Name

Middle Name

Last Name

Effective Date of Change

Corporation or Limited Liability Company:

If the CCB does not receive all of the following, we cannot process your name change request:

- Legal documentation supporting the change of your individual name (i.e., marriage license, signed Order of legal name change, etc.)
- I have updated my registry with the Oregon Secretary of State

Note: If your entity name needs to be updated, please submit the Address/Business Name Change Request form found on the CCB website, www.oregon.gov/ccb.

NEW First Name

Middle Name

Last Name

Effective Date of Change

SIGNATURE

By signing below, I certify that all statements, answers, and representations on this form are true, complete.

Person making request *(Please print name of sole proprietor, partner, officer, member, or trustee)*

Signature *Required* *(Sole proprietor, partner, officer, member, or trustee)*

Date