

Business Name: _____ Business License Account #: _____



CITY OF NEWPORT NEWS

CONTRACTOR

PROOF OF STATE LICENSE/CERTIFICATION OR EXEMPTION DECLARATION

Effective July 1, 2010, the Code of Virginia §54.1-1111(B) provides that no locality shall issue or renew a local business license unless the contractor has furnished his state license or tradesman certification issued by the Virginia Department of Professional and Occupational Regulation (DPOR) or written statement of being exempt from the requirements, supported by an affidavit. **PROVIDE A COPY OF ONE OF THE ITEMS LISTED - OR - COMPLETE THE EXEMPTION DECLARATION BELOW.**

PROVIDE COPY:

- **Class A Contractor License** - Any contractor who undertakes a single project, the total value of which is \$120,000 or more, with no limit on aggregate annual total is required to have a valid Class A License.
- **Class B Contractor License** - Any contractor who undertakes a single project, the total value of which is over \$7,500 but less than \$120,000, with an aggregate annual total of \$750,000 is required to have a valid Class B License.
- **Class C Contractor License** - Any contractor who undertakes a single project, the total value of which is over \$1,000 but less than \$7,500, with an aggregate annual total of \$150,000 is required to have a valid Class C License.
- **Tradesman Certification** – Must have tradesman certification regardless of project amount (e.g. electrical, plumbing, heating, ventilation, and air conditioning.)

AFFIDAVIT

EXEMPTION DECLARATION: I acknowledge and affirm that I am not subject to licensure or certification as a contractor or subcontractor pursuant to the Code of Virginia Title §54.1, as required by the Virginia Department of Professional and Occupational Regulation (DPOR).

Reason for exemption: _____

Sole Proprietorship _____
NAME OF OWNER SIGNATURE OF OWNER

Partnership _____
NAME OF GENERAL PARTNER SIGNATURE OF GENERAL PARTNER

Corporation _____
NAME OF PRESIDENT SIGNATURE OF PRESIDENT

Limited Liability Corporation _____
NAME OF MEMBER/OFFICER SIGNATURE OF MEMBER/OFFICER

[] City [] County of _____ State/Commonwealth of _____

Subscribed and acknowledged before me, this _____ day of _____, 20_____

By _____
Name of Person Signing Affidavit Signature of Notary Public

Registration No. _____ My commission expires: _____