



**GENERAL AND MECHANICAL CONTRACTOR
APPLICATION REQUIREMENTS AND INSTRUCTIONS (DOC 165)**

LICENSING PERIOD

All General Contractor licenses expire October 31st in even numbered years.

All Mechanical Contractor licenses expire October 31st in odd-numbered years.

LICENSURE FEE

The license fee is \$350. Fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds. **NO CASH IS ACCEPTED.**

LICENSE GROUP REQUIREMENTS

Limits per bid and job are based on the provided financial documentation or bond. Additional information about financial group limits can be found on the Board's website. A financial statement or a surety bond must be submitted to determine your license group limitation. If you are submitting a financial statement, you must meet either the net worth/ total equity requirement below or working capital. You are not required to meet both requirements.

General Contractor				
Group	Bid and Job \$ Limitation	Working Capital	Net Worth/ Total Equity	Surety Bond Requirement
Group 1	\$100,000	\$10,000	\$20,000	\$20,000
Group 2	\$400,000	\$40,000	\$60,000	\$60,000
Group 3	\$1,000,000	\$100,000	\$150,000	\$150,000
Group 4	\$3,000,000	\$175,000	\$250,000	\$250,000
Group 5	\$Unlimited	\$250,000	\$350,000	\$350,000
Working Capital = Current Assets - Current Liabilities Net Worth = Total Assets - Total Liabilities				

Mechanical Contractor				
Group	Bid and Job \$ Limitation	Working Capital	Net Worth/ Total Equity	Surety Bond Requirement
Group 1	\$35,000	\$3,500	\$7,000	\$7,000
Group 2	\$100,000	\$10,000	\$15,000	\$15,000
Group 3	\$200,000	\$20,000	\$30,000	\$30,000
Group 4	\$400,000	\$40,000	\$60,000	\$60,000
Group 5	\$Unlimited	\$200,000	\$300,000	\$300,000
Working Capital = Current Assets - Current Liabilities Net Worth = Total Assets - Total Liabilities				

FINANCIAL STATEMENT GUIDELINES

- Submit an acceptable financial statement for the requested group limit with a balance sheet dated no more than twelve months before the date of the relevant application showing a minimum net worth or working capital for each license group.
- Compiled, reviewed, and audited financial statements must be prepared by a licensed CPA. Verify a CPA is licensed at <https://cpaverify.org/>.
- Financial statements must clearly illustrate the applicant's net worth or working capital on the provided balance sheet and include a signed cover letter from the CPA.
- Personal financial statements of an entity's principals for an entity with less than two years' operating experience are acceptable for the initial application only.
- A financial statement from a parent company may be accepted if it is noted in the financial statement "notes" or accompanied by an authorized letter from the parent company stating the entity is a wholly owned subsidiary.

Groups 1 and 2 – (submit one)

- Owner Prepared financial statement with an affidavit of accuracy, [Document #172](#); or
- [Surety Bond Form for General Contractors](#) / [Surety Bond Form for Mechanical Contractors](#)

Groups 3 and 4 – (submit one)

- Financial statement compiled by a licensed CPA in accordance with GAAP, including all disclosures required by GAAP or
- [Surety Bond Form for General Contractors](#) / [Surety Bond Form for Mechanical Contractors](#)

Group 5 – (submit one)

- An audited balance sheet prepared by a licensed CPA in accordance with GAAP, including all disclosures required by GAAP; or
- [Surety Bond Form for General Contractors](#) / [Surety Bond Form for Mechanical Contractors](#)

SC SECRETARY OF STATE

If the company was incorporated in South Carolina, attach a copy of the Certificate of Existence (or Good Standing) from the SC Secretary of State. If the company was incorporated in another state, then attach a copy of the Certificate of Authority from the SC Secretary of State. Regardless of where the company was incorporated or organized, attach copies of the Articles of Incorporation or Organization and documentation establishing percentage of ownership in the company.

Completed applications may be submitted to the Board at PO Box 11329, Columbia, SC 29211 or by email to contact.clb@llr.sc.gov.



South Carolina Department of Labor, Licensing and Regulation

South Carolina Contractor’s Licensing Board

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11329 • Columbia • SC • 29211

Phone: 803-896-4686 • Contact.CLB@llr.sc.gov • Fax: 803-896-4814

llr.sc.gov/clb

**GENERAL AND MECHANICAL CONTRACTOR
APPLICATION FOR LICENSURE (DOC 165)**

This application form is used for:

- New license, including a business name change with a new Federal Tax ID number, or a change of corporate structure of business (Corporation, LLC, LLP, etc.).
- Reinstatement of a license that has been lapsed over 90 days.

Do not use this application if you need to revise a current license, such as change in license classification or subclassification, a change in existing bidding limitations, or name change with the same Federal Tax ID number and corporate structure. To submit revisions to a current license, complete the [General and Mechanical Contractor Revision Application \(Doc 180\)](#).

Submit the following with your application:

- The license fee is \$350. Fees are non-refundable. License fee in the form of a check or money order made payable to SCCLB. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds. **NO CASH IS ACCEPTED.**
- Verification to conduct business in SC from the SC Secretary of State (not required for a sole proprietorship). If the company was incorporated in South Carolina, attach a copy of the Certificate of Existence (or Good Standing) from the SC Secretary of State. If the company was incorporated in another state, then attach a copy of the Certificate of Authority from the SC Secretary of State.
- Copies of the Articles of Incorporation or Organization and documentation establishing percentage of ownership in the company.
- Signed Company Acknowledgement
- Financial Statement or Surety Bond supporting the requested group limitation.
- Completed [PQP /QP Initial Application\(s\) \(Doc 168\)](#) for individuals who are not currently certified by the Board or have a certification that has been inactive for more than four years **or** completed [PQP/QP Revision Application \(Doc 181\)](#) to add an active PQP/QP certification or a certification that has been inactive for less than four years; or for individuals requesting to be a dual qualifier for two licenses complete a [Request to Become a Dual Primary Qualifying Party \(Doc 173\)](#) and meet all four (4) criteria).

APPLICANT INFORMATION

The individual or company listed in this section will be designated as the “Licensee.” Licensees must sign contracts, apply for permits, conduct business, and advertise in this name only.

Requested License Type: General Contractor Mechanical Contractor

Licensee/Legal Name: _____

Doing Business As (DBA) Name: _____

Business Phone: _____ Email (required): _____

Business Address: _____ County: _____
Physical street address, City, State and Zip Code

Mailing Address (if different from above): _____

Federal Tax ID or SSN: _____ Website: _____

1. Is the licensee/entity listed above a current or previous SC Contractor? Yes No

If yes, license number: _____

2. Is this a name change or form of business change? Yes No

Type of Business:

Corporations, LLCs, LLPs, or LPs must submit a Federal Tax ID number, verification to conduct business in SC from the SC Secretary of State, Articles of Incorporation or Organization, and documentation establishing percentage of ownership in the company.

- Sole Proprietorship Domestic/Foreign Corporation Partnership
 Limited Liability Partnership Limited Liability Company

State of incorporation or organization: _____

OWNERS AND OFFICERS

Provide the name, title, date of birth, contact information and percentage of business ownership of each owner, officer, partner, and/or member of the Applicant. For ownership interests held by other business entities, include state of incorporation or organization. Attach a separate sheet if necessary.

Name: _____ **Title:** _____

% Ownership: _____ Date of Birth: _____

Name: _____ **Title:** _____

% Ownership: _____ Date of Birth: _____

Name: _____ **Title:** _____

% Ownership: _____ Date of Birth: _____

PRIMARY QUALIFYING PARTY (PQP) / QUALIFYING PARTY (QP) INFORMATION

Applicants must designate a Primary Qualifying Party (PQP) for each classification or subclassification for which a license is desired as a prerequisite to licensure. A PQP is the qualifying party who has been designated by the applicant as the principal individual responsible for directing or reviewing work performed by the applicant in a particular classification or subclassification. Additional qualifying parties are those individuals who have passed all the necessary exams to qualify the applicant for licensure but have not been designated as the primary qualifying party. This section must be completed for every PQP and QP. Attach additional copies of this page as needed.

Submit with this application a completed [PQP /QP Initial Application\(s\) \(Doc 168\)](#) for individuals who are not currently certified by the Board or have a certification that has been inactive for more than four years **or** completed [PQP/QP Revision Application \(Doc 181\)](#) to add an active PQP/QP certification or a certification that has been inactive for less than four years; or for individuals requesting to be a dual qualifier for two licenses complete a [Request to Become a Dual Primary Qualifying Party \(Doc 173\)](#) and meet all four (4) criteria).

PRIMARY QP (PQP) **ADDITIONAL QP (QP)**

Full Legal Name: _____ Certification # (if applicable): _____

Last 5 digits of SSN: _____ Date of Birth: _____

Do you currently hold a South Carolina qualifying party certificate? Yes No

If yes, check one of the boxes below.

- I am requesting to transfer my S.C. qualifying party certificate from License #: _____ to the applicant listed in Section 1 (must submit [Doc 181](#)).
- I am requesting to be a dual qualifier for both licenses (**must** submit the [Request to Become a Dual Primary Qualifying Party \(Doc 173\)](#) and meet all four (4) criteria).

GROUP LIMIT

Limits per job are determined by the financial documentation or surety bond provided. Please indicate the method for which you are qualifying for licensure. Additional information about financial group limits may be found on the Board's website.

Groups 1 and 2 – (submit one)

- Owner Prepared financial statement with an affidavit of accuracy, [Document #172](#); or
- [Surety Bond Form for General Contractors](#) / [Surety Bond Form for Mechanical Contractors](#)

Groups 3 and 4 – (submit one)

- Financial statement compiled by a licensed CPA in accordance with GAAP, including all disclosures required by GAAP or
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Group 5 – (submit one)

- An audited balance sheet prepared by a licensed CPA in accordance with GAAP, including all disclosures required by GAAP; or
- [Surety Bond Form for General Contractors](#) / [Surety Bond Form for Mechanical Contractors](#)

Requested Group Limit (Select one):

Group 1 Group 2 Group 3 Group 4 Group 5

Qualifying for Requested Group Limit by (Select one):

Net Worth Working Capital Surety Bond

Type of financial documentation submitted with the application:

CPA Audited Balance Sheet CPA Reviewed Financial Statement CPA Compiled Financial Statement
 Owner Prepared Financial Statement ([Doc. 172](#)) Surety Bond

CLASSIFICATIONS AND SUBCLASSIFICATIONS

Only select the classifications/sub classifications for which the PQP/QP applicant(s) qualify:

General Contractor-Building (Includes Wood Frame Structures, Nonstructural Renovation, Masonry, Pre-engineered Metal Buildings, Roofing, Structural Framing, and Miscellaneous Metals.)

Limited Building Contractor (construction up to 3 stories in height, groups 1-3 of job contract limits)

Unlimited Building Contractor (groups 1-5 of job contract limits)

General Contractor – Highway (includes all the following subclassifications)

Bridges Concrete Paving Asphalt Paving Grading Highway Incidental*

General Contractor-Public Utilities (includes all the following subclassifications):

Pipelines Water and Sewer Lines Water and Sewer Plants

General Contractor-Specialty Subclassifications:

Boiler Installation

Boring and Tunneling*

Concrete

Glass and Glazing

Marine

Masonry*

Miscellaneous Metals*

Nonstructural Renovation

Pre-engineered Metal Buildings

Public and Electrical Utility

Railroad Lines*

Roofing

Structural Framing

Swimming Pools

Wood Frame Structures

(*no technical exam required)

Mechanical Contractor Subclassifications:

- Air Conditioning Electrical Heating
- Lightning Protection Systems Packaged Equipment Plumbing
- Pressure and Process Piping Refrigeration

CURRENT AND FORMER LICENSES

Provide information on all other jurisdictions where this business entity or any owner, officer, partner, or member of this entity has been or is currently licensed as a general or mechanical contractor or licensed in a building related profession. Do not list individual municipalities if there is no statewide license:

Name of Licensee	State/Jurisdiction	Type of License/Certificate (Include classification)	License No.	Original Issue Date	Expiration Date

BACKGROUND QUESTIONS

Answer all the questions below. If any questions have a “yes” answer, you are required to complete and submit the [Explanatory Statement of Yes Answers Form \(Doc. 142\)](#) for each person to whom a “yes” answer applies.

1. Has this entity or any owner, officer, partner, or member of this entity been convicted of, pled guilty or nolo contendere to a crime (other than a minor traffic offense)? Yes No

If yes, in addition to [Doc 142](#), a criminal background check must be provided from the state in which the conviction occurred for anyone to whom the “yes” answer applies, along with the court disposition and any other pertinent documentation. For South Carolina criminal background reports contact SLED at www.sled.sc.gov. Out-of-state applicants may submit a state-issued report, or any report generated by an accredited agency on PBSA’s website found here: thepbsa.org/. All criminal background reports must not be older than thirty (30) days from the date of application.

2. Has this entity or any owner, officer, partner, or member of this entity had a professional license or certificate denied, suspended, revoked or otherwise been disciplined in any state or jurisdiction, including South Carolina? Yes No

If yes, in addition to [Doc 142](#), official documentation related to the relevant disciplinary action must be provided.

3. Does this entity or any owner, officer, partner, or member of this entity have any unresolved complaints or charges pending before any professional licensing board in any state or jurisdiction, including South Carolina? Yes No

If yes, in addition to [Doc 142](#), official documentation related to the relevant disciplinary action must be provided.

4. Does this entity or any owner, officer, partner, or member of this entity have any outstanding monetary judgments related to construction or have any bankruptcies? Yes No

If yes, in addition to [Doc 142](#), official documentation related to the monetary judgments, including the order of judgment or final disposition, and bankruptcies, as well as any payment plans that have been established to satisfy construction related monetary judgments, must be provided.

STATE SCHOOL VOLUNTARY DONATION

Effective May 16, 2022, SC Code of Laws Section 40-11-40 provides applicants for contractor’s licensure the ability to make voluntary contributions to accredited public institutions of higher learning offering degrees in construction science, building science or civil engineering. Each institution receiving funds pursuant to this section shall utilize the funds to provide or enhance programs related to building science or civil engineering, which shall include, but is not limited to, scholarships, fellowships, research, faculty development, and continuing education programs. Contributions are voluntary and not required for licensure. If you would like to make a contribution, please indicate the school below and the amount you wish to donate. This is a one-time contribution and is not required with future applications.

If you would like to donate to a state sponsored school, please select one only:

- Clemson USC Columbia The Citadel SC State
- Undesignated (dispersed in a pro rata manner based on full-time enrollment in qualifying programs)

Donation Amount (include with fee): \$ _____

ATTESTATION

- I, the owner/officer/partner/member, having full and complete authority to sign on behalf of the applicant, certify that the primary qualifying party identified is an integral part of the applicant’s business and is actively involved in the management, supervision and operations for the work undertaken by the applicant requesting this license.
- I understand that when a PQP ceases to serve as the licensee’s PQP, the Board must be notified within 15 days of the disassociation. Failure to notify the Board within fifteen days of a PQP’s disassociation may result in license and certificate cancellation.
- I further certify that all statements contained herein are true, accurate, and complete to the best of my knowledge and belief.
- I acknowledge that the provision of false, incorrect, or incomplete information may result in the cancellation or denial of a license issued pursuant to this application, the initiation of disciplinary action against my license or certification and may be subject to civil and criminal proceedings.
- I agree that all information in this application may be verified and investigated.
- I have read and am familiar with the South Carolina Contractor’s Practice Act regulating contracting and hereby agree to abide by such laws.

Primary Qualifying Party Name (Print): _____

PQP Title: _____ Date: _____

Owner/President/Authorized Party Name (Print): _____

Signature: _____ Title: _____ Date: _____

PRIVACY DISCLOSURE

South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.