

North Carolina Irrigation Contractors' Licensing Board P.O. Box 41421, Raleigh, NC 27629-1421 Tel 919-872-2229 Fax 919-872-1598 www.nciclb.org; email info@nciclb.org

Individual License Renewal Form • January 1, 2023 – December 31, 2023 Please print legibly or type

| Individual License # | _ | | | For NCI | CLB Administra Use Only | ation | |
|--|--|---------------------|---|------------------|----------------------------|----------|--|
| Namo | | | | Ck# | | | |
| Name First | Middle | | Last | Amoun | nt | | |
| Company Name | | | | | | | |
| Mailing Address | | <u>Other Ad</u> | <u>ldress</u> | | | | |
| Address | | Address | S | | | | |
| ity/State/Zip | | City/Sta | City/State/Zip | | | | |
| County | | Other P | hone | | | | |
| Office Phone | | Cell Pho | one | | | | |
| Office Fax | | Websit | e | | | | |
| Email | | (This e | email will be publish | ied on the websi | ite for the pub | olic) | |
| Email | | | _ (For communication with the Board only, do not publish) | | | | |
| 1. Have there been any changes in th incorporation, becoming an LLC or e not yet disclosed to the Board? | | | | | Yes | No | |
| 2. Is your \$10,000 Surety Bond or \$1 | 0,000 Irrevocable I | Letter of Credit | active and in good s | tanding? | Yes | No | |
| Check appropriate boxes: | | | | | | | |
| \$100 Individual Renewal | \$50 Individual | Late Fee | ee \$250 Reinstatement Fee \$50 Lost St | | | np fee | |
| Indicate method of payment: Ch | eck / Credit Card | 1 | | | | | |
| Renewals postmarked after Decen of more than one license or licensee Submit the completed renewal form | on one check) India | | | | | | |
| Please attach proof of attendance for | r each Continuing Eo | ducation activit | ty submitted. | | | | |
| | NCICLB P.O. Box 4142 Raleigh, NC 2 | | | | | | |
| Paying by Credit Card: MasterCa | ard / Visa AMC | OUNT PAID: \$ | 5 | | | | |
| Card # | | Exp. Date | 3 Di | git # on back of | сс | | |
| Name on CC: | | CC Holder Signature | | | | | |
| Billing Address | | City/State | /Zip | | | | |
| Incomplete renewal forms (incluc require a \$50.00 late fee, per licer | | | | urned and will | | PLY SEAL | |
| | | Apply Irr | rigation Contrac | tor seal here | 1 | HERE | |
| Licensee's Signature | | | | | | | |

Public Notice Statement <u>Required</u> by N.C. Gen. Stat. § 143-789(a), Effective December 31, 2017

Any worker who is defined as an employee by N.C. Gen. Stat. §§ 95-25.2(4)(NC Department of Labor), 143-762(a)(3)(Employee Fair Classification Act), 96-1(b)(10)(Employment Security Act), 97-2(2)(Workers' Compensation Act), or 105-163.1(4)(Withholding; Estimated Income Tax for Individuals) shall be treated as an employee unless the individual is an independent contractor. Any employee who believes that they have been misclassified as an independent contractor by their employer, may report the suspected misclassification to the Employee Classification Section within the North Carolina Industrial Commission.

Employee Classification Section North Carolina Industrial Commission 1233 Mail Service Center Raleigh, NC 27699-1233 Telephone: (919) 807-2582 Fax: (919) 715-0282 Email: <u>ernp.classification@ic.nc.gov</u>

Employee misclassification is defined as avoiding tax liabilities and other obligations imposed by Chapter 95, 96, 97, 105, or 143 of the North Carolina General Statutes by misclassifying an employee as an independent contractor. [N.C. Gen. Stat.§ 143-786 (a)(5)]

I certify that I have read the Public Notice Statement above and that I understand it.

Please indicate below which statement best applies to you:

Within the past twelve (12) months I have not been investigated for employee misclassification.

Within the past twelve (12) months I **have been** investigated for employee misclassification and have attached the results of the investigation to this application.

Note: Pursuant to North Carolina General Statute § 143-789(b): "An occupational licensing board or commission shall deny the license, permit, or certification application of any applicant who fails to comply with the certification and disclosure requirements of this section."

Licensee's Signature: _____

Date:_____