



North Carolina Irrigation Contractors' Licensing Board

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DECAL ORDER FORM

COMPLETE THE INFORMATION REQUESTED BELOW AND RETURN TO THE BOARD OFFICE ALONG WITH A CHECK. DECALS ARE \$3.00 EACH. PLEASE MAKE CHECKS PAYABLE TO NCICLB.

Individual's Name _____

Individual's License # _____ Year: _____

Number of Decals _____ Check Amount \$ _____

Decals will be mailed to the mailing address on record. If you have an address change please list new contact information below.

Mailing Address (circle one) Home / Office:

Street: _____

City/State/Zip: _____

NCICLB office use only

Check #: _____

Amt: _____