



ARIZONA REGISTRAR OF CONTRACTORS



Douglas A. Ducey, Governor

Jeff Fleetham, Director

Form RC-L-201E	OWNERSHIP/PERSONNEL CHANGE FORM (TO ADD/UPDATE PERSONNEL AND CONTACT INFO)
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INSTRUCTIONS

Use this Ownership/Personnel Change Form to add or remove owners and personnel on an existing license. You may also use this form to update personnel and contact information on an existing license.

Mail in or drop off this request and required documentation to: Arizona Registrar of Contractors
1700 W Washington St., Ste. 105
Phoenix, Arizona 85007

OR

Email this request and required documentation to: Licensing@roc.az.gov

CHECKLIST (ADDING PERSONNEL ONLY)

In addition to submitting the Ownership/Personnel Change Form, you must also submit the following for any person being added:

- Background Check.** A copy of the payment transaction receipt from the [background check](#) for any individuals being added to an existing license.
- Government-Issued Identification.** A legible copy of government-issued photo identification for any individual being added to the license(s). Acceptable forms of identification include a valid driver's license or passport.
- Supplemental Disclosure Forms.** Include any applicable disclosure forms requested in Part 2.
- Signatures.** Completed signatures section.

TIERED ENTITIES

If you are adding or removing an entity as an owner/member you must submit the [Tiered Organizational Chart](#).

REMOVAL OF A QUALIFYING PARTY

If the Qualifying Party is being removed as a member/manager, owner, or director/officer and must also be removed as a Qualifying Party, then you must submit the [Qualifying Party Disassociation Form](#) as well.

AGENCY DISCLOSURE

Pursuant to A.R.S. § 41-1030(G), the Registrar provides the following disclosures:

- **A.R.S. § 41-1030(B):** An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- **A.R.S. § 41-1030(D):** This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.
- **A.R.S. § 41-1030(E):** A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the agency's adopted personnel policy.
- **A.R.S. § 41-1030(F):** This section does not abrogate the immunity provided by § 12-820.01 or 2-820.02.

DO NOT SUBMIT THESE INSTRUCTIONS WITH YOUR FORM

1700 W. Washington Street, Suite 105 • Phoenix AZ 85007-2812
602.542.1525 • Within AZ 877.692.9762 • Fax 602.542.1599 • www.roc.az.gov



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Form
RC-L-201E

OWNERSHIP/PERSONNEL CHANGE FORM (TO ADD/UPDATE PERSONNEL AND CONTACT INFO)

PART I: LICENSE INFORMATION

NAME OF LICENSED ENTITY	
1. Business Name or Sole Proprietor's Full Name, including DBA if applicable	2. License Numbers for this entity (Separate multiple licenses using commas)

PART 2: PERSONNEL INFORMATION

PERSONNEL INFORMATION:			
<i>Enter the information for any person being added to or removed from the license(s). This may also be used to amend an existing person's information (e.g. name, current ownership percentage, and title/position).</i>			
1. Name as it appears on your government issued ID			
2. Add/Remove/Change (note or circle one)	3. Current Ownership Percentage	4. Title or Position	
5. Date of Birth (MM/DD/YYYY)	6. Driver's License or Government ID (State and Number)	7. Social Security Number	
8. Residential Address		City	State Zip
9. Phone Number		10. Email Address	
CONSENT			SELECT ALL THAT APPLY
I consent to receive notifications from the Registrar at the contact information provided above via			<input type="checkbox"/> Email <input type="checkbox"/> Text Message
<i>"Notifications" include renewal notices and monthly newsletters. By consenting to receive notifications via text or email, you will not be excluded from receiving notifications by regular mail.</i>			

PERSONNEL INFORMATION:			
<i>Enter the information for any person being added to or removed from the license(s). This may also be used to amend an existing person's information (e.g. name, current ownership percentage, and title/position).</i>			
1. Name as it appears on your government issued ID			
2. Add/Remove/Change (note or circle one)	3. Current Ownership Percentage	4. Title or Position	
5. Date of Birth (MM/DD/YYYY)	6. Driver's License or Government ID (State and Number)	7. Social Security Number	
8. Residential Address		City	State Zip
9. Phone Number		10. Email Address	
CONSENT			SELECT ALL THAT APPLY
I consent to receive notifications from the Registrar at the contact information provided above via			<input type="checkbox"/> Email <input type="checkbox"/> Text Message
<i>"Notifications" include renewal notices and monthly newsletters. By consenting to receive notifications via text or email, you will not be excluded from receiving notifications by regular mail.</i>			

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PERSONNEL INFORMATION:				
Enter the information for any person being added to or removed from the license(s). This may also be used to amend an existing person's information (e.g. name, current ownership percentage, and title/position).				
1. Name as it appears on your government issued ID				
2. Add/Remove/Change (note or circle one)		3. Current Ownership Percentage		4. Title or Position
5. Date of Birth (MM/DD/YYYY)		6. Driver's License or Government ID (State and Number)		7. Social Security Number
8. Residential Address			City	State
9. Phone Number			10. Email Address	
CONSENT				SELECT ALL THAT APPLY
I consent to receive notifications from the Registrar at the contact information provided above via				<input type="checkbox"/> Email <input type="checkbox"/> Text Message
"Notifications" include renewal notices and monthly newsletters. By consenting to receive notifications via text or email, you will not be excluded from receiving notifications by regular mail.				

PART 3: DISCLOSURES

DISCLOSURES	
Only persons being added to an existing license must answer the following questions and provide any applicable supplementary documents. If this does not apply to you, skip to Part 3.	
Note: Failure to accurately answer these questions is a material misrepresentation of fact and a violation of A.R.S. §32-1154(A)(5).	
DISCIPLINED LICENSE INFORMATION	
If 'yes' is selected for question 1, the applicable person(s) must complete and attach a Disciplined License Disclosure Form with this application. Select One	
1. Has any person being added ever been named on a contractor's license in any state (including Arizona) that was revoked, disciplined, or suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No
FELONY CHARGES	
If 'yes' is selected for questions 2 or 3, the applicable person(s) must complete and attach the Felony Disclosure Form with this application. Answering 'yes' does not automatically disqualify the person(s) being added from being listed on the existing license(s). Select One	
2. Has any person being added ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Does any person being added have a felony charge pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
UNLICENSED ACTIVITY	
If 'yes' is selected for question 4, the applicable person(s) must complete and attach the Unlicensed Activity Disclosure Form with this application. Select One	
4. Has any person being added ever received a citation for, or been convicted of, contracting without a license in any state (including Arizona)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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PART 4: SIGNATURES

Authorized Representative

An authorized person must sign this form. An **authorized person** is an individual that is already listed on the license as an owner or operator. If an authorized person does not sign this form, the Registrar will not accept this request.

I acknowledge that I am a Person named on this license for the purposes and duties of all Registrar statutes and rules, including, but not limited to, A.R.S. §§ 32-1122, 32-1139(B) & 32-1154.

I certify that I have reviewed the entire contents of this application and all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate. I understand that falsification of any information on this application is a violation of the Arizona Criminal Code in Arizona Revised Statutes, Title 13, Chapter 27. I understand that pursuant to A.R.S. §§ 32-1154(A)(5)(19) & 32-1122(D) providing false information is cause for denial of this application and cause for discipline of ROC licenses.

I authorize the personnel listed in Part 2 to be added to or removed from the entity noted in Part 1.

_____	_____	_____
Print Name	Signature	Date

Owner or Personnel Being Added/Removed

The person listed in Part 2: Personnel Change/Information must sign this application.

I certify that I have reviewed the entire contents of this application and all statements, answers, and representations made in this application, including all supplementary statements attached hereto, are true and accurate. I understand that falsification of any information on this application is a violation of the Arizona Criminal Code in Arizona Revised Statutes, Title 13, Chapter 27. I understand that pursuant to A.R.S. §§ 32-1154(A)(5)(19) & 32-1122(D) providing false information is cause for denial of this application and cause for discipline of ROC licenses.

I acknowledge I will be a person named on this license for the purposes and duties of all Registrar statutes and rules, including, but not limited to, A.R.S. §§ 32-1122, 32-1139(B) & 32-1154. These purposes and duties include liability for violations arising out of or relating to agreements that were entered into, monies received, or work performed while I am named on this license.

I understand that because A.R.S. § 32-1155(A) establishes a two-year period for the filing of complaints, my liability for violations of Registrar statutes and rules continues for up to two years after I am removed from this entity.

By submission of this application, I consent to a criminal background investigation pursuant to A.R.S. § 32-1122(H).

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Print Name	Signature	Date