Minnesota Department of Labor and Industry Construction Codes and Licensing Division Licensing and Certification Services 443 Lafayette Road North St. Paul, MN 55155



Personal License, Registration, & Certification Change of Address

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| License Inforr | mation – Must provide to | change an a | address and/or renew license | , registration | , or certif | fication |
| LICENSE TYPE | | LICENSE/R | EGISTRATION/CERTIFICATE # | EXPIRATION | DATE | |
| DATE OF BIRTH | 1 | SOCIAL SECURITY NUMBER (last 4 digits) | | PHONE NUM | BER | |
| LAST NAME | | | FIRST NAME | 1 | | MIDDLE INITIAL |
| Current Addre | ess Information | | | | | |
| STREET ADDRI | ESS (PO Box must include str | reet address) | | | | |
| CITY | | | | STA | TE. | ZIP CODE |
| Former Addre | ess Information – Must pr | ovide past a | address information before a | ddress may b | e change | ed |
| FORMER ADDR | RESS (PO Box must include s | treet address) | | | | |
| CITY | | | | STA | .TE | ZIP CODE |
| Certification: | I certify that I hold this form is correct and acc | | istration, or certificate and th | at the inform | ation pro | vided on this |
| SIGNATURE (mandatory) | | | | | ATE SIGNI | ED |