
INFORMATION FOR HOME IMPROVEMENT CONTRACTOR APPLICATION:

Section 4114 of the Columbus Code requires the following be presented in order to apply for Board approval of a contractor license.

- Home Improvement Contractor Application; Completed and notarized application must be submitted no later than seven (7) days prior to the board meeting. The tentative meeting schedule for the Board of Home Improvement and Demolition Contractors is the 1st Wednesday of every month.
- A copy of passing test results (score of 70% or higher) for 767 Ohio Home Improvement Contractor, must be attached to the complete license application. For testing information, please contact The International Code Council at (877) 783-3926 or www.iccsage.org/certification-exam-catalog/. **Home Improvement Limited Contractor License applicants are not required to take the test.**

NOTE:

Please review all information and have your application notarized before filing for a license. If the application is not notarized, all documents will be returned without being processed. Applicant must possess the required experience as stated within this application.

Upon Board approval, the applicant will receive notification by certified mail with instructions on how to complete the remaining steps in the licensing process. Please do not come in for License processing until you have received approval notification by mail.

BOARD APPLICATION FEE

Non-Refundable \$185.00 filing fee

Payment may be made in person or by mail to:

City of Columbus
Department of Building and Zoning Services
111 N Front Street
Columbus, Ohio 43215

Checks are to be made payable to Columbus City Treasurer

For additional information, visit us online at <https://www.columbus.gov/bzs/contractor-licensing-and-registration/Contractor-Licensing-Registration/> or call our Customer Service Center at (614) 645-6090.

Columbus Building Code, Chapter 4114.505: Minimum experience qualifications for a department-issued license.

- (A) **Home Improvement General Contractor License.** The applicant for a home improvement general contractor license shall have a minimum of three (3) full years of “hands-on” installation experience in the one (1), two (2), and three (3) family home improvement field.
- (B) **Home Improvement Limited Contractor License.** The applicant for a home improvement limited contractor license in the following fields of specialization shall have a minimum of one (1) full year of “hands- on” experience in that field for which a license is applied:
 - (1) Residential roofing
 - (2) Residential siding, windows, and doors
 - (3) Residential deck installation
 - (4) Residential basement waterproofing
 - (5) Residential prefabricated fireplaces and wood or coal stoves
 - (6) Residential masonry fireplaces
 - (7) Residential fencing
 - (8) Residential sidewalks and driveway approaches
 - (9) Residential exterior lathing and stucco
 - (10) Residential swimming pools and spas
 - (11) Residential asphalt paving
 - (12) Residential irrigation sprinkler
 - (13) Residential gypsum board
- (C) “Hands-on” experience shall be characterized by the active personal involvement of the applicant in the activity directly related to the type of license for which application is being made. Such active personal involvement shall have provided for the acquisition of practical experience, knowledge, and mechanical aptitude in the physical installation, operation, control, adjustment, repair, and maintenance of the specific trade or craft.
- (G) Alternatively, in lieu of the above requirements of Section (A), (B), or (C) above, the applicant for any Home Improvement license may be:
 - (1) A registered design professional who holds a current and valid certificate as an architect or engineer as allowed under the Ohio Revised Code and who is experienced in residential design and construction; or
 - (2) A graduate architect or engineer, with at least one (1) full year’s experience as a designer or installer in the specific field of work for the type of home improvement contractor license for which application is made.
- (H) Determination of a Full Year. A “full year” of experience, where required in sections (A), (B), (C), (G) above, shall be based on twelve (12) consecutive calendar months during which the applicant shall have been gainfully and verifiably employed for not less than sixteen hundred (1600) working hours at the specific craft, trade, or profession for which an application for a department-issued license is being made.

Home Improvement Contractor Application

111 N Front Street, Columbus, Ohio 43215
Phone: 614-645-6090 • www.bzs.columbus.gov

ALL FEES ARE NON-REFUNDABLE • Make checks payable to the Columbus City Treasurer

NOTE: Home Improvement contractors are permitted to work on existing 1, 2, and 3 family dwellings. For application requirements for ANY license or registration, refer to Columbus Building Code, Chapter 4114.

Home Improvement General Contractor (a copy of the applicant's passing test results must be attached)

Home Improvement Limited Contractor; Specify Limitations below;

| | | | | |
|------------------------|--|---------------------------|---------------------------------|---------|
| Siding, Windows, Doors | Deck Installation | Basement Waterproofing | Sidewalks & Driveway Approaches | Roofing |
| Swimming Pools & Spas | Asphalt Paving | Exterior Lathing & Stucco | Irrigation Sprinkler | Fencing |
| Masonry Fireplaces | Prefabricated fireplaces & wood or coal stoves | Gypsum Board | | |

I, the undersigned, hereby apply for a Home Improvement Contractor License, in the City of Columbus, Ohio and for that purpose give the following information and answers to ALL of the questions contained in this application:

Full Name _____ Date of Birth _____

Home Address _____ City/State/Zip _____ Home Phone Number _____

Email Address for communication related to approval of applicant's license: _____

Are you a United States citizen or national, a lawful permanent resident, or an alien authorized to work in the United States? Yes No

Have you previously held this type of license with the City of Columbus? Yes No

If Yes, provide the following if known: License Number: _____ Expiration Date: _____

Have you ever been summoned before any City of Columbus Contractor Board of Review for any type of violation hearing? Yes No

If Yes, which board? _____ Date _____ Board Decision _____

WORK HISTORY

To be considered for the **Home Improvement General Contractor** license, the applicant must have a minimum of three (3) full years of "hands-on" installation experience in the one-, two-, and three-family home improvement field.

To be considered for the **Home Improvement Limited Contractor** license, the applicant must have a minimum of one (1) year of "hands-on" experience in the field(s) for which application is being made.

Experience must be listed in the "DESCRIPTION OF WORK EXPERIENCE" box or on an attached additional sheet or resume.

List your present employment, then follow with any previous employment that applies. Only the employment listed will be considered in determining eligibility of the applicant (attach additional sheets and/or resume if necessary):

Check here if additional sheets are attached

| | | | |
|--|--------------------------------|--|----------------|
| FROM (MO/DAY/YR) | TITLE OF YOUR PRESENT POSITION | EMPLOYER/ORGANIZATION | BUSINESS PHONE |
| TO (MO/DAY/YR) | MAILING ADDRESS | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | ARE YOU WORKING FOR THIS EMPLOYER NOW? | YES NO |
| | | IF YES, MAY WE CONTACT THIS EMPLOYER? | YES NO |
| DESCRIPTION OF WORK EXPERIENCE | | | |

Incomplete information will result in the rejection of this submittal.

| | | | |
|--|------------------------|--|----------------|
| FROM (MO/DAY/YR) | TITLE OF YOUR POSITION | EMPLOYER/ORGANIZATION | BUSINESS PHONE |
| TO (MO/DAY/YR) | MAILING ADDRESS | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | ARE YOU WORKING FOR THIS EMPLOYER NOW? | YES NO |
| | | IF YES, MAY WE CONTACT THIS EMPLOYER? | YES NO |
| DESCRIPTION OF WORK EXPERIENCE | | | |

| | | | |
|--|------------------------|--|----------------|
| FROM (MO/DAY/YR) | TITLE OF YOUR POSITION | EMPLOYER/ORGANIZATION | BUSINESS PHONE |
| TO (MO/DAY/YR) | MAILING ADDRESS | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | ARE YOU WORKING FOR THIS EMPLOYER NOW? | YES NO |
| | | IF YES, MAY WE CONTACT THIS EMPLOYER? | YES NO |
| DESCRIPTION OF WORK EXPERIENCE | | | |

STATEMENT BY APPLICANT

I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my right of licensure, and may subject me to prosecution under Ohio Revised Code Section 2921.13.

Signature of Applicant (sign in presence of notary or Building & Zoning Svcs. Official) Print/Type Name Date

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

Signature of Notary Public or Building & Zoning Svcs. Official My Commission Expires

OFFICIAL USE ONLY

Board Action for Certification: Approved Disapproved Tabled Rejected for Eligibility Void Due to Time Limit

Board Member Initials: YES _____ | _____ | _____ | _____ | _____ | _____ | _____
NO _____ | _____ | _____ | _____ | _____ | _____ | _____

Signature of Board Chairman: _____ Review Date: _____

By (Secretary): _____ Date: _____