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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| only the licens | | nse informat | ecurity Number are requested ion. All information provided of Chapter 13. | | |
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| License Inform | nation – Must provide to | change an a | address and/or renew license | e, registration, or cert | ification |
| LICENSE TYPE | | LICENSE/R | EGISTRATION/CERTIFICATE # | EXPIRATION DATE | |
| DATE OF BIRTH | l . | SOCIAL SECURITY NUMBER (last 4 digits) | | PHONE NUMBER | |
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| Current Addre | ess Information | | | | |
| STREET ADDRE | ESS (PO Box must include st | reet address) | | | |
| CITY | | | | STATE | ZIP CODE |
| Former Addre | ss Information – Must pr | ovide past a | address information before a | ddress may be chang | ed |
| FORMER ADDR | ESS (PO Box must include s | treet address) | | | |
| CITY | | | | STATE | ZIP CODE |
| Certification: I certify that I hold this license, registration, or certificate and that the information provided on this form is correct and accurate. | | | | | |
| SIGNATURE (mandatory) | | | | DATE SIGN | IED |