NOTICE TO CONTRACTORS

Please read this page carefully. This information is important.

➤ **The Contractor's Registration Act requires that all home improvement contractors register with the N.J. Division of Consumer Affairs and display their registration number listed, NJHIC#, at the following places:**

- ❑ within their places of business (the original registration certificate)
- ❑ in all advertisements
- ❑ on business documents, contracts and correspondence with consumers
- ❑ on all commercial vehicles.

➤ **ALL Home Improvement Contracts in excess of $500 and all changes in the terms and conditions of the contract, must be in writing and are required to include, but are not limited to:**

- ❑ the legal name, business address, and contractor's registration number, and the legal name and business address of the sales representative
- ❑ a copy of the certificate of commercial general liability insurance for $500,000 per occurrence, and the telephone number of the insurance agency issuing the certificate
- ❑ description of the work to be performed and principal products and materials to be used or installed
- ❑ a statement of any guarantee or warranty with respect to any product, material, labor or service made by the seller of home improvement
- ❑ description of any mortgage or security interest to be taken in connection with the financing or sale of the home improvement
- ❑ total price including finances charges
- ❑ signatures by all parties involved
- ❑ notice to the consumer in 10 -point bold-faced type as follows:

YOU MAY CANCEL THIS CONTRACT AT ANY TIME BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER RECEIVING A COPY OF THIS CONTRACT. IF YOU WISH TO CANCEL THIS CONTRACT, YOU MUST EITHER:

1. **SEND A SIGNED AND DATED WRITTEN NOTICE OF CANCELLATION BY REGISTERED OR CERTIFIED MAIL, RETURN RECEIPT REQUESTED; OR**
2. **PERSONALLY DELIVER A SIGNED AND DATED WRITTEN NOTICE OF CANCELLATION TO:**

(Name, address and phone number of contractor.)

If you cancel this contract within the three day period, you are entitled to a full refund of your money. Refunds must be made within 30 days of the contractor's receipt of the cancellation notice.

➤ **Contractors should also make sure they have read through the Statutes and Regulations which can be found on the Division's home page www.nj.gov/oag/ca/HIC/HIC_stats.htm and which is also contained in the original home improvement registration application package.**

The New Jersey "Contractors' Registration Act"
Frequently Asked Questions

Notice: *The following questions and answers are intended for the convenience of contractors who may be required to register under this Act. This should not be considered a legal document nor a complete explanation of the law and should not be relied upon as such. The New Jersey Division of Consumer Affairs ("the Division") recommends that you consult an attorney if you need legal advice.*

1. What is the Contractors' Registration Act?

The "Contractors' Registration Act" (the "Act") establishes a mandatory registration program for contractors who are in the business of selling or making home improvements in New Jersey.

2. What is a home improvement?

Any remodeling, altering, painting, repairing, renovating, restoring, moving, demolishing, or modernizing of a structure used as a place of residence, or of any portion of the property on which the structure is located, is considered a home improvement for the purposes of the Act.

Home improvement includes the construction, installation, replacement, improvement, or repair of driveways, sidewalks, swimming pools, terraces, patios, landscaping, fences, porches, windows, doors, cabinets, kitchens, bathrooms, garages, basements and basement waterproofing, water purifiers (not including the installation or disconnection of water filtration systems), insulation installation, siding, wall-to-wall carpeting or attached or inlaid floor coverings, and other changes, repairs, or improvements made to residential property. Construction of a new residence is not considered a home improvement under the Act.

3. Who is a home improvement contractor?

Any person, whether a sole proprietorship, partnership, corporation, limited liability company or any other type of business organization that is engaged in the business of selling or making home improvements is considered a home improvement contractor for the purposes of the Act.

4. Who must register?

The Act requires any contractor engaging in the business of making or selling home improvements, whether an individually owned business or a corporation, limited liability company, partnership, or association, to register annually with the Division, unless specifically exempted from registration under the Act.

5. I am a landscaper and I only mow lawns and trim shrubs. Must I register?

No. However, you must register if you plant flowers, shrubs and trees or lay sod or establish a lawn.

6. What if I do not register?

Any home improvement contractor who is required to register but who has not received a registration number by is prohibited from selling or making home improvements. Unregistered contractors who continue to sell or make home improvements may be subject to civil penalties and possibly criminal penalties as well.

7. How does registration affect my ability to obtain construction permits?

Effective January 1, 2006, municipalities are barred from issuing construction permits to an unregistered home improvement contractor who is required to register.

8. What do I need to do to become registered?

To become registered, a contractor must:

- Complete and submit an application on the form provided by the Division, including copies of all documents required;
- Complete the Disclosure Statement page of the application;
- File proof that it has secured and maintains, in its name as the insured, a policy of commercial general liability insurance in a minimum amount of $500,000 per occurrence; and
- Pay a fee of $110.00.

9. How do I obtain an application for registration?

Application forms are available online at the Division website. Copies of the application form may be obtained by calling the Division at 1-888-656-6225, and are also available from construction officials in most municipalities.

10. Is there a fee?

Yes. The nonrefundable fee is $110.00 payable to the Division.

11. My home improvement contracting business has been in operation for many years. Is it "grandfathered," or must it be registered?

All home improvement contractors must register, unless they are exempt. There is no provision for grandfathering.

12. Once I become registered, how long will my registration be valid?

Once the initial registration has been obtained, it must be renewed before March 31 of each year. Reminder notices are mailed to all registered home improvement contractors in October of each year, with instructions about how to renew their registration.

13. I only do home improvement jobs "on the side." Do I still have to register?

Yes. The Contractors' Registration Act applies to any person, corporation, partnership or association engaging in the business of making or selling home improvements — regardless of whether the home improvements are done on a full-time or part-time basis.

14. I work for a home improvement contractor. Do I have to register?

Employees or officers of a registered home improvement contractor are not required to register with the Division separately as long as any home improvement work they are doing is done on behalf of the registered contractor. However, if the employee sells or makes home improvements "on the side" or separate and apart from the work he or she does for the registered contractor, that person must register with the Division separately.

15. I am a subcontractor of a home improvement retailer that has a net worth of more than $50,000,000. Do I have to register?

Yes. A subcontractor of a home improvement retailer must register unless otherwise exempt. However, a home improvement retailer with a net worth of at least $50,000,000 and employees of such a retailer who are making or selling home improvements within the scope of their employment are exempt from registration.

16. I am a subcontractor, paid by the general contractor, and never enter into a contract with the consumer. Do I have to register?

Yes, a subcontractor of a contractor must register.

17. I am a retail merchant with a net worth under $50,000,000 who sells retail products used in home improvements. Do I have to register?

No. You are not required to register unless you also charge for the installation of those products. For example, X carpet store sells wall-to-wall carpet. X carpet store does not have to register. However, Y carpet store sells wall-to-wall carpet and Y store employees install the carpet. Y carpet store must register. Z carpet store sells wall-to-wall carpet and charges the customer for installation of the carpet. Z contracts with Joe Smith to install the carpet; Joe Smith is not an employee of Z carpet store. Both Z carpet store and Joe Smith must register.

18. I plan to help my cousin remodel her house. Do I have to register?

No. The registration requirements do not apply to any person performing a home improvement on a home he or she owns or that is owned by a member of his or her family.

19. Do I have to register if I am improving a home belonging to a charity or a non-profit corporation?

No. A person performing home improvement work on a residential property owned by a bona fide charity or other non-profit organization is not required to register.

20. I work exclusively on commercial properties. Do I have to register?

The Act applies only to residential or "non-commercial" units — single-family or multi-family homes — or commercial properties that are being converted to residential or "non-commercial" units. The law does not apply to properties that are being used for commercial purposes.

21. I am licensed as a home improvement contractor by a local town. Do I still have to register?

Yes. Effective January 1, 2006, the Act supersedes any municipal law or regulation that provides for the licensing or regulation of home improvement contractors. However, contractors must still obtain construction permits from the municipality in which they're working and must submit to inspections by municipal construction code officials.

22. Do people who handle maintenance for community associations or co-ops have to register?

No. The Act exempts from the registration requirements individuals employed by a community association or cooperative corporation — commonly referred to as "handymen," superintendents and/or maintenance workers — who make home improvements within the scope of their employment at the residential property owned or leased by the community association or cooperative corporation.

23. Do architects, heating, ventilating, air conditioning and refrigeration contractors, professional engineers, landscape architects, land surveyors, electrical contractors, master plumbers, locksmiths, burglar alarm businesses, fire alarm businesses, new home builders, or any other individuals or businesses that already hold licenses from the State of New Jersey have to register?

No. As long as the licensee is acting within the scope of his or her profession, he or she is exempt from registration. For example, a new home builder does not have to register if it is constructing a new home, but must register if it is building an addition or renovating an existing residential structure.

24. If a business claims an exemption based on a license that may be issued only to individuals, must an owner or principal of the business be one of the license holders?

Yes. For example, a pump installer's license can only be issued by DEP to an individual. If a principal of a drilling company is licensed as a pump installer, the company is not required to register as a home improvement contractor. However, if a drilling company employs a licensed pump installer who is not a principal of the company, the company is required to register.

25. Does the law apply to out-of-state contractors?

Any contractor who sells or makes improvements to homes or non-commercial properties in New Jersey must register with the Division — regardless of whether the contractor is based in New Jersey or some other state.

26. Are there penalties for not registering?

Any contractor who fails to register as required by the Contractors' Registration Act but who continues to sell or make home improvements or who violates any other section of the law is subject to civil monetary penalties of up to $10,000 for the first offense and up to $20,000 for each subsequent offense. Also, anyone who knowingly violates the Act is considered guilty of a crime of the fourth degree and faces additional fines as well as possible jail time.

27. I was convicted of a crime in the past. Am I ineligible to become registered?

Not necessarily. No individual will be disqualified from registration or have his or her registration revoked on the basis of any conviction if that person can demonstrate to the Division clear and convincing evidence of that person's rehabilitation. The Division, in determining whether someone has demonstrated rehabilitation, must consider the following:

- the nature and responsibility of the position the convicted individual would hold;
- the nature and seriousness of the offense;
- the circumstances under which the offense occurred;
- the date of the offense;
- the age of the individual when the offense was committed;
- whether the offense was an isolated or repeated incident;
- any social conditions which may have contributed to the offense; and
- any evidence of rehabilitation including, among other things, good conduct in prison or in the community, counseling or psychiatric treatment received.

28. What are some other regulatory requirements affecting contractors?

Contractors are required to comply with the existing regulations, including the use of written contracts for home improvement jobs that cost more than $500.

29. Must I display my registration number?

Yes. The Act requires contractors to prominently display their registration numbers within their places of advertisements, on business cards, on their commercial vehicles and on all business documents, including contracts.

New Jersey Office of the Attorney General
Division of Consumer Affairs
Office of Consumer Protection
Regulated Business Section
124 Halsey Street, 7th Floor, P.O. Box 46016, Newark, NJ 07101

Home Improvement Contractor Application for Initial Registration

Information that you provide on this application may be subject to public disclosure as required by the Open Public Records Act (OPRA).

Instructions: Please print clearly, **in ink** and answer all of the questions. Your application will not be processed until all of the questions have been answered and all of the required documents, and the registration fee, have been received by this Division. If a question does not apply to your business, write "N/A." **Refer to: Instructions for Register as a HIC.**

1. **Business Name**
The name must match the name listed on the corporate documents and the insurance certificate.

2(a). **LIST ALL OTHER NAMES UNDER WHICH THE APPLICANT DOES BUSINESS .**
2(b). **IF YOU DO NOT USE ANY OTHER NAME(S), WRITE "NONE." IF THE ANSWER TO THIS QUESTION IS LEFT BLANK, IT WILL AUTOMATICALLY DEFAULT TO "NONE."**

2(c). Indicate the type of business you own.

☐	Sole Proprietorship:	Attach a copy of the business' Trade Name Certificate. Refer to Sample #1 or #2.
☐	Partnership:	Attach a copy of the business' Trade Name Certificate. Refer to Sample #1 or #2.
☐	Corporation:	Attach a copy of the business' Certificate of Incorporation. Refer to Sample #3, #4 or #5.
☐	Limited Liability Co.:	Attach a copy of the business' Certificate of Formation. Refer to Sample #5, #6 or #7.
☐	Limited Liability Partnership:	Attach a copy of your Certificate of Formation. Refer to Sample #5, #6 or #7.

Additional Requirements

☐	Out-of-State Corporation:	Attach a copy of the business' New Jersey Certificate of Authority and the formation documents from your home state. Refer to Sample #9.
☐	Alternate Name:	Attach a copy of the business' Registration of Alternate Name Form C-150G. Refer to Sample #8.

Contact your local county clerk's office to obtain a Trade Name Certificate.

Contact the N.J. Department of the Treasury, Division of Revenue, at (609) 292-9292, if the business is a corporation.

Refer to the samples.

3. **Business Address** (Must be a street address.)	E-mail Address:	
City	State	ZIP Code
Telephone No. (include area code)	Fax No. (include area code)	

4. **Mailing Address** If the address is the same as in question #3, write "N/A."

5. **Agent** – If the business is a corporation (L.L.C., L.L.P., etc.), you must provide the name and address of an agent in New Jersey who is authorized to accept documents on its behalf for the service of process.

Agent's Name		
Street Address		
City	State: New Jersey	ZIP Code
Telephone No. (include area code)	Fax No. (include area code)	

Instructions for Registration as a Home Improvement Contractor

Please print clearly, **in ink** and answer all of the questions. Your application will not be processed until all of the questions have been answered and all of the required documents, and the registration fee, have been received by the Division. **If a question does not apply to your business, write "N/A."**

1. List the name of your business. This will be the name that appears on your registration.
   If you are doing business under your own name, list your full legal name. For example, "John Doe."
   If you are doing business under a fictitious name, print your business name as it is listed on your Trade Name Certificate.
   For example, write "John Doe's Painting & Carpentry."

2. Provide a copy of your Alternate Name Form C-150G or Trade Name Certificate. If you do not use any other names, write "N/A."

6. Provide proof that you have secured and maintain a policy of commercial general liability insurance in a minimum amount of $500,000 for each occurrence. Acceptable proof must include an effective policy number, the date of issuance, the effective date and your signature. Refer to the enclosed Sample #10.

7(a). If you are a sole proprietor and answer "Yes" to question 7(a), the business' registration will be denied until you provide the Division with a written release issued by the lenders or guarantors stating that you have cured the default or are making payments on the loan in accordance with a repayment agreement approved by the lender or guarantor.

7(b). If you are a sole proprietor and answer "Yes" to question 7(b), the business' registration will be denied until you submit a certification from the court or the Probation Division that the conditions that resulted in the denial have been satisfied.

7(c). If you are a sole proprietor and not a U.S. citizen, submit a copy of your immigration documents.

8. FEIN - If you are not sure whether your business requires a Federal Employer Identification Number (FEIN), call 609-292-9292 or call 1-800-829-4933. If you do not have a FEIN, you may now obtain one, on-line, at www.irs.gov.

Please allow time for your application to be processed, and for the business' registration to be printed and mailed.

6. Does the business have a certificate of liability insurance of at least $500,000 for each occurrence? **You must attach your insurance certificate or your application will not be processed.** Refer to the enclosed insurance Sample #10.	☐ **Yes**	☐ **No**

Complete questions 7(a), 7(b) and 7(c) only if the business is run by a sole proprietor.

7(a).	Is the sole proprietor in default of a New Jersey or federal direct or guaranteed educational loan? If "Yes," see the instructions.		☐ **Yes** **See Instructions**	☐ **No**
7(b).	Is the sole proprietor the subject of a child-support warrant or has the applicant failed to pay a court-ordered child-support obligation in an amount equal to or more than the amount of child support payable for six months, failed to pay any court-ordered health care coverage for the past six months or failed to respond to a subpoena relating to a paternity or child-support proceeding? If "Yes," see the instructions.		☐ **Yes** **See Instructions**	☐ **No**
7(c).	Check the appropriate box that indicates the sole proprietor's citizenship/immigration status.	☐ **U.S. citizen**	☐ **Alien** **Lawfully admitted for permanent residence in U.S.**	☐ **Other**

Provide the business' Federal Employer Identification Number **and** provide **your** Social Security number.

8(a). Federal Employer Identification Number (FEIN) ☐☐☐ - ☐☐☐ - ☐☐☐

8(b). Social Security number ☐☐☐ - ☐☐ - ☐☐☐☐

*Pursuant to N.J.S.A. 54:50-24 et seq. of the New Jersey taxation law, N.J.S.A. 2A:17-56.44e of the New Jersey Child Support Enforcement Law, Section 1128E(b)(2)A of the Social Security Act and 45 C.F.R. 60.7,60.8 and 60.9, the Office of Consumer Protection is required to obtain your Social Security number. Pursuant to these authorities, the Office of Consumer Protection is also obligated to provide your Social Security number to:

a. the Director of Taxation to assist in the administration and enforcement of any tax law, including for the purpose of reviewing compliance with State tax law and updating and correcting tax records; and

b. the Probation Division or any other agency responsible for child-support enforcement, upon request.

9. **List the full name, home and business street address and business telephone number of each owner, officer, director, principal and person with an ownership interest of 10 percent or more in the business and the percentage of ownership held. If the applicant is a partnership, each member of the partnership must be listed. (Use additional sheets of paper if necessary.)**

Please print clearly.

You must indicate Percentage of Ownership
_____ %

Name and title

Business street address | City | State | ZIP code

Home street address | City | State | ZIP code

Business telephone number (include area code)

You must indicate Percentage of Ownership
_____ %

Name and title

Business street address | City | State | ZIP code

Home street address | City | State | ZIP code

Business telephone number (include area code)

You must indicate Percentage of Ownership
_____ %

Name and title

Business street address | City | State | ZIP code

Home street address | City | State | ZIP code

Business telephone number (include area code)

10(a). Is any officer, director, principal or person with an ownership interest of 10 percent or more in the business the holder of any professional or occupational license, certificate or registration issued by any state or jurisdiction? If "Yes," provide the following information:	☐ **Yes**	☐ **No**

Holder's Name	Name(s) of the agency that issued the License, Certificate or Registration	Type of License, Certificate or Registration	License, Certificate or Registration Number	Date Issued

10(b). Has any action been taken against this license, certificate or registration? If "Yes," please provide any supporting documentation and the outcome of the action.	☐ **Yes**	☐ **No**

11. Have any of the business' officers, directors, principals or persons with an ownership interest of 10 percent or more in the business:

A. Violated or failed to comply with the provisions of any act, regulation or order administered or issued by the New Jersey Division of Consumer Affairs? ☐ **Yes** ☐ **No**

B. Entered into any consent order or assurance of voluntary compliance with the New Jersey Division of Consumer Affairs or any other state or federal agency? **or** ☐ **Yes** ☐ **No**

C. Been adjudged liable in an administrative or civil action in any state or federal agency involving any of the following situations:

(i.) Obtaining a license, certificate or registration through fraud, deception or misrepresentation?

(ii.) Engaging in the use or employment of dishonesty, fraud, deception, misrepresentation, false promise or false pretense?

(iii.) Engaging in gross negligence, gross malpractice or gross incompetence?

(iv.) Engaging in acts of negligence, malpractice or incompetence involving selling or making a home improvement?

(v.) Engaging in professional or occupational misconduct? and/or

(vi.) Engaging in theft, fraud or deceptive business practices? ☐ **Yes** ☐ **No**

11(a). If you answered "Yes" to **any part** of question number 11, please provide the following:

Name of applicant, partner(s), person(s) or business against whom action was taken.	Date of Action	Name and address of the government agency that took action against the individual (applicant, partner, etc.)	Type of Action Taken

Important Instructions:

For each occurrence listed above, please provide a true copy of all final orders and/or judgments, consents and agreements. For the purposes of this paragraph, a judgment of liability in an administrative or civil action shall include, but not be limited to, any finding or admission that the business, or any of its officers, directors, principals or persons with an ownership of 10 percent or more in the business engaged in an unlawful practice or practices related to any of the named situations C(i) through C(vi) above, regardless of whether that finding was made in the context of an injunction, a proceeding resulting in the denial, suspension or revocation of a license, certificate or registration, consented to in an assurance of voluntary compliance or any similar order or legal agreement with any state or federal agency.

Disclosure Statement

(Please print your business name and check either the "Yes" or "No" box below.)

Business Name: _____

Has the applicant or any of its officers, directors, principals or persons with an ownership of 10 percent or more in the applicant been convicted of a crime involving moral turpitude, or any crime relating adversely to selling or making home improvements or any crime in violation of any of the following provisions of the "New Jersey Code of Criminal Justice," Title 2C of the New Jersey Statutes, or the equivalent under the laws of any other jurisdiction?

1. Any crime of the first degree;
2. Any crime which is a second- or third-degree crime and is a violation of chapter 20 or 21 of Title 2C of the New Jersey Statutes; or
3. Any other crime which is a violation of N.J.S.A. 2C:5-1 (criminal attempt), 2C:5-2 (conspiracy), 2C:11-2 (criminal homicide), 2C:11-3 (murder), 2C:11-4 (manslaughter), 2C:12-1 (assault), 2C:12-3 (terroristic threats), 2C:13-1 (kidnapping), 2C:14-2 (sexual assault), 2C:15-1 (robbery), subsection a. or b. of 2C:17-1 (arson and related offenses), subsection a. or b. of 2C:17-2 (causing or risking widespread injury or damage), 2C:18-2 (burglary), 2C:20-4 (theft by deception), 2C:20-5 (theft by extortion), 2C:20-7 (receiving stolen property), 2C:20-9 (theft by failure to make required disposition of property received), 2C:21-2 (criminal simulation), 2C:21-2.1 (fraud relating to driver's license or other document issued by government agency to verify identity or age; simulation), 2C:21-2.3 (fraud relating to motor vehicle insurance identification card; production or sale), 2C:21-3 (frauds relating to public records and recordable instruments), 2C:21-4 (falsifying or tampering with records), 2C:21-6 (frauds relating to credit cards), 2C:21-7 (deceptive business practices) 2C:21-12 (defrauding secured creditors), 2C:21-14 (receiving deposits in a failing financial institution), 2C:21-15 (misapplication of entrusted property and property of government or financial institution), 2C:21-19 (wrongful credit practices and related offenses), 2C:27-2 (bribery in official and political matters), 2C:27-3 (threats and other improper influence in official and political matters), 2C:27-5 (retaliation for past official action), 2C:27-9 (public servant transacting business with certain persons), 2C:27-10 (acceptance or receipt of unlawful benefit by public servant for official behavior), 2C:27-11 (offer of unlawful benefit to public servant for official behavior), 2C:28-1 (perjury), 2C:28-2 (false swearing), 2C:28-3 (unsworn falsification to authorities), 2C:28-4 (false reports to law enforcement officials), 2C:28-5 (tampering with witnesses and informants; retaliation against them), 2C:28-6 (tampering with or fabricating physical evidence), 2C:28-7 (tampering with public records or information), 2C:28-8 (impersonating a public servant or law enforcement officer), 2C:30-2 (official misconduct), 2C:30-3 (speculating or wagering on official action or information), 2C:35-5 (manufacturing, distributing or dispensing a controlled dangerous substance), 2C:35-10 (possession, use or being under the influence or failure to make lawful disposition of a controlled dangerous substance), 2C:37-2 (promoting gambling), 2C:37-3 (possession of gambling records), 2C:37-4 (maintenance of gambling resort).

☞ If "Yes," please provide the following:				☐ **Yes**	☐ **No**
Name of person against whom action was taken	**Date of Action**	**Nature of the Offense**	**Name and address of the government agency that took action**	**Action Taken**	

For each conviction, attach the following:

1. Judgment of conviction.
2. Sentencing order.
3. Presentencing report.
4. Letter confirming probation and/or parole status.
5. Documents showing clear and convincing evidence of rehabilitation, including letters or references from members of your community who are not related to you by blood or marriage, and who can attest to your character.
6. Certificate of Rehabilitation pursuant to N.J.S.A. 2A: 168A-7 to 16.

CERTIFICATION

I, as a principal officer of the business, understand that this application for registration will be accepted and the registration issued only if the requirements of the Consumer Fraud Act ("Act"), N.J.S.A. 56:8-137 to N.J.S.A. 56:8-152, and the regulations promulgated under the Act have been met.

I certify that the business and each of its officers, directors, principals and persons with an ownership of 10 percent or more in the applicant are capable of discharging the functions of a registrant in a manner consistent with the public's health, safety and welfare.

I certify that all of the information provided in connection with this application is true to the best of my information, knowledge and belief. I understand that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient to deny registration or to withhold renewal of or suspend or revoke a registration issued by the Division of Consumer Affairs ("the Division").

I agree to cooperate fully with any request by the Attorney General or the Division to provide any assistance or information and to produce any records requested by the Division, and to cooperate in any inquiry, investigation or hearing conducted by the Division.

You must complete all five lines below.

_____
Business name of applicant

_____
Your name (please print clearly)

_____
Your signature

_____
Your title

_____
Date

Any changes, additions or deletions to the information you have provided must be submitted to the address listed below within 20 days.

Please submit:

(1) A completed application – all of the questions must be answered.
(2) A nonrefundable check or money order in the amount of $110.00 made payable to the N.J. Division of Consumer Affairs.
(3) Proof of insurance required by N.J.A.C. 13:45-17-12.6. Refer to Sample #10. The certificate of insurance must also reflect the business' fictitious name(s) or alternate name(s) if any.
(4) Attach the corporate document(s).
(5) Attach any other documents required by questions #7(a), 7(b), 7(c), 10(a) and 11(a), and the Disclosure Statement.

Mailing Address:

State of New Jersey
Division of Consumer Affairs
Regulated Business Section
Home Improvement Unit
124 Halsey Street, 7th Floor
P.O. Box 46016
Newark, NJ 07101

If you need a duplicate or replacement registration, the fee is $20 each. Make the check payable to the New Jersey Division of Consumer Affairs.

For information on documentation issued by the State of New Jersey call ***609-292-9292*** or visit ***www.state.nj.us/njbgs*** .
For information on a **Trade Name Certificate** issued in New Jersey contact your local county clerk's office.
For information on documentation issued by another state or jurisdiction, contact the issuing authority for a copy of the document(s).

N.J. TRADE NAME CERTIFICATE

Sample #1

OCEAN COUNTY CLERK'S OFFICE
N.J. CERTIFICATE OF TRADE NAME

CARL W. BLOCK, COUNTY CLERK
OCEAN COUNTY COURTHOUSE
P.O. BOX 2191, TOMS RIVER, N.J. 08754-2191
(732) 929-2018 1-800-722-0291
www.oceancountyclerk.com

This is to certify that:

The following statement is made by the undersigned pursuant to the provisions of N.J.R.S. 56:1-1 et seq. ("Business and Partnership Names").

1. The name under which the business is now or is about to be conducted is [redacted]
2. The nature of the business is [redacted]
3. The address where the said business is now or is about to be conducted is [redacted]
4. The full name and residence or post-office address of each person connected with the said business as a member of the firm, partner or owner conducting or about to conduct the said business is

[redacted]

BK 14383 PG 1019
CARL W. BLOCK, COUNTY CLERK
OCEAN COUNTY, NEW JERSEY

Business Telephone No. ( ) [redacted]

The person or partners or members of the firm or partnership conducting or transacting the said business, who are not resident in this State, do hereby constitute the Clerk of the County wherein nonresident person or persons, partner or partners upon whom all original process may be served (a) in an action or legal proceeding against said firm or partnership of (b) in an action against said person or persons for any debt, damages or liability contracted or incurred by them in or growing out of the conduct or transaction of said business. It is agreed that such original process which may be served upon the County Clerk shall be of the same force and validity as if served upon said nonresident person or persons, partners or members of the firm or partnership. The authority hereof shall as to such nonresidents, continue in force so long as they shall do, conduct or transact the said business in this State under such name.

Witnessed by:

Dated: 8/12/09

State of New Jersey, County of Ocean } ss.:

[redacted], who I am satisfied is/are the person(s) [redacted] foregoing certificate, has/have personally appeared before me and, after being [redacted] has/have certified that the statements contained therein are true

Sworn to and Subscribed before me this [redacted] day of [redacted]

NOTARY SIGNATURE

NOTICE
The filing of this Trade Name Certificate does not preclude the use of this name by an incorporated entity.

Note: The appearance of these documents may vary depending on the state and county of origin.

OUT-OF-STATE TRADE NAME CERTIFICATE

Sample #2

DSCB: 54-311 (Rev. 83)
FICTITIOUS NAME REGISTRATION

CORPORATION BUREAU
DEPARTMENT OF STATE
308 NORTH OFFICE BUILDING
HARRISBURG, PENNSYLVANIA 17120

FILING FEE: ☐ Corporate/Individual — $65.00 ☐ Corporation $40.00 ☒ Individual $25.00 ☒ Check Enclosed ☐ Charge Account #

In compliance with the requirements of Section 311 of Act 1982-295 (54 Pa. C.S. §311), this undersigned entity(ies) desiring to carry on or conduct a business in this Commonwealth under an assumed or fictitious name, style or designation, does (do) hereby certify that:

1. Fictitious Name: [redacted]
2. Address of the principal place of business; (including street and number) [redacted] (County) [redacted]
3. Brief statement of the character or nature of the business: [redacted]
4. Individual or individuals interested in the business: (name and address)

(NAME)	(NUMBER)	(STREET)	(CITY)	(STATE)	(ZIP CODE)
[redacted]					

5. Entity other than an individual interested in the business:

(NAME)	(FORM OF ENTITY)	ORGANIZING JURISDICTION	ADDRESS IN JURIS.	REGISTERED OFFICE (if any)

6. I am familiar with the provisions of Section 332 of the Fictitious Names Act and understand that filing under the Act does not create any exclusive or other right to the fictitious name.
7. Agent, if any, authorized to execute amendments, withdrawals, or cancellations.

IN TESTIMONY WHEREOF, the undersigned have caused this registration to be executed this 17 day of September, 1988.

[redacted]

Individual — Individual
Individual — Individual
Corporate Seal — Name of Corporation
Secretary of Assistant Secretary — President or Vice President
Corporate Seal — Name of Corporation
Secretary of Assistant Secretary — President or Vice President

— FOR OFFICE USE ONLY —

030 FILED	002 CODE	003 REV BOX	SEQUENTIAL NO.	100 MICROFILM NUMBER
SEP 22 1988	REVIEWED BY	004 SICC	AMOUNT	001 CORPORATION NUMBER
	DATE APPROVED		$ 25	[redacted]
	DATE REJECTED	CERTIFY TO ☐ REV.	INPUT BY	LOG IN (REFILE)
	MAILED BY DATE	☐ L & I ☐ OTHER	VERIFIED BY	LOG OUT / LOG OUT (REFILE)

SEP 22 1988

Secretary of the Commonwealth
Department of State
Commonwealth of Pennsylvania

CERTIFICATE OF INCORPORATION

Sample #3

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE, BUSINESS GATEWAY SERVICES
CERTIFICATE OF INC, (PROFIT)

[redacted]

The above-named DOMESTIC PROFIT CORPORATION was duly filed in accordance with New Jersey State Law on 01/10/2007 and was assigned identification number [redacted]. Following are the articles that constitute its original certificate.

1. Name:
[redacted]

2. The Registered Agent:
[redacted]

3. The Registered Office:
[redacted]

4. Business Purpose:
Building/Construction

5. Stock:
[redacted]

6. First Board of Directors:
[redacted]

7. Incorporators:
[redacted]

Continued on next page ...

Page 1

Sample #3

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE, BUSINESS GATEWAY SERVICES
CERTIFICATE OF INC, (PROFIT)

[redacted]

[redacted]

8. The Main Business Address:
[redacted]

Signatures:
[redacted]

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 01/11/2007

Bradley Abelow
Treasurer of the State of New Jersey

Page 2

SAMPLE FORMS

For information on documentation issued by the State of New Jersey call ***609-292-9292*** or visit ***www.state.nj.us/njbgs*** .
For information on a **Trade Name Certificate** issued in New Jersey contact your local county clerk's office.
For information on documentation issued by another state or jurisdiction, contact the issuing authority for a copy of the document(s).

CERTIFICATE OF INCORPORATION

Sample #4

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF INC, (PROFIT)

[redacted]

The above-named DOMESTIC PROFIT CORPORATION was duly filed in accordance with New Jersey state law on 03/03/2009 and was assigned identification number [redacted]. Following are the articles that constitute its original certificate.

1. Name:
[redacted]

2. Registered Agent:
[redacted]

3. Registered Office:
[redacted]

4. Business Purpose:
[redacted]

5. Stock:
[redacted]

6. Effective Date of this Filing is:
[redacted]

7. Designation of Shares:
[redacted]

8. First Board of Directors:
[redacted]

9. Incorporators:
[redacted]

10. Main Business Address:
[redacted]

Signatures:
[redacted]

Page 1

Sample #4

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF INC, (PROFIT)

[redacted]

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of March, 2009

R. David Rousseau
State Treasurer

Certification# 113809620
Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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SAMPLE FORMS

SHORT FORM STANDING

Sample #5

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

[redacted]

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on November 2, 2009.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

[redacted]

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 16th day of November, 2009

R. David Rousseau
State Treasurer

Certificate Number: 115756144
Verify this certificate online at
http://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

Note: ***Sole Proprietor and Partnership documents*** are issued by your local county clerk's office.
Certificate of Formation and Certificate of Incorporation documents are issued by the State of New Jersey.

For information on documentation issued by the State of New Jersey call ***609-292-9292*** or visit ***www.state.nj.us/njbgs*** .
For information on a **Trade Name Certificate** issued in New Jersey contact your local county clerk's office.
For information on documentation issued by another state or jurisdiction, contact the issuing authority for a copy of the document(s).

CERTIFICATE OF FORMATION

Sample #6

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF FORMATION

[redacted]

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey state law on 11/12/2009 and was assigned identification number [redacted]. Following are the articles that constitute its original certificate.

1. Name:
[redacted]

2. Registered Agent:
[redacted]

3. Registered Office:
[redacted]

4. Business Purpose:
Construction

5. Members/Managers:
[redacted]
12 ROSE STREET
[redacted]

6. Main Business Address:
[redacted]

Signatures:
[redacted]

Page 1

Sample #6

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF FORMATION

[redacted]

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of November, 2009

R. David Rousseau
State Treasurer

Certification# 115730823

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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SAMPLE FORMS

CERTIFICATE OF FORMATION

Sample #7

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE, BUSINESS GATEWAY SERVICES

CERTIFICATE OF FORMATION

[redacted]

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey State Law on 12/11/2003 and was assigned identification number 0400044342. Following are the articles that constitute its original certificate.

1. Name:
[redacted]

2. The Registered Agent:
[redacted]

3. The Registered Office:
[redacted]

4. Business Purpose:
[redacted]

5. Members/Managers:
[redacted]

6. The Main Business Address:
[redacted]

Signatures:
[redacted]

Continued on next page ...

Page 1

Sample #7

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE, BUSINESS GATEWAY SERVICES

CERTIFICATE OF FORMATION

[redacted]

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this [redacted]

John E McCormac, CPA
Treasurer of the State of New Jersey

Page 2

For information on documentation issued by the State of New Jersey call ***609-292-9292*** or visit ***www.state.nj.us/njbgs*** .
For information on a **Trade Name Certificate** issued in New Jersey contact your local county clerk's office.
For information on documentation issued by another state or jurisdiction, contact the issuing authority for a copy of the document(s).

REGISTRATION OF ALTERNATE NAME

Sample #8

Mail to: PO Box 308 Trenton, NJ 08646

STATE OF NEW JERSEY
DIVISION OF REVENUE

Overnight to: 33 West State St. 5th Floor Trenton, NJ 08608-1214

FEE REQUIRED

REGISTRATION OF ALTERNATE NAME

FILED
SEP 28 2009
STATE TREASURER

C-150G

Complete the following applicable information, and sign in the space provided. Please note that once filed, the information contained in the filed form is considered public. **Refer to the instructions on page 26 for filing fees and field** [illegible] number to remit the appropriate fee amount. Use attachments if more space is required for any field.

Check Appropriate Statute:

- [ ] Title 14A:2-2.1 (2) New Jersey Business Corporation Act
- [ ] Title 15A:2-2-3 (b) New Jersey Nonprofit Corporation Act
- [X] Title 42:2B-4 Limited Liability Company
- [ ] Title 42:2A-6 Limited Partnership

Pursuant to the provisions of the appropriate statute, checked above, of the New Jersey Statutes, the undersigned corporation/business entity hereby applies for the registration of an Alternate Name in New Jersey for a period of five (5) years, and for that purpose submits the following application:

1. Name of Corporation/Business:
2. NJ 10-digit ID number:
3. Set forth state of Original Incorporation/Formation:
4. Date of Incorporation/Formation:
   Date of Authorization (Foreign):
5. Alternate Name to be used:
6. State the purpose or activity to be conducted using the Alternate Name:
7. The Business intends to use the Alternate Name in this State.
8. The Business has not previously used the Alternate Name in this State in violation of this Statute, or, if it has, the month and year in which it commenced such use is:

Signature requirements:

For Corporations	Chairman of the Board., President, Vice-President
For Limited Partnerships	General Partner
For all Other Business Types	Authorized Representative
SIGNATURE:	TITLE: Owner
NAME (please type):	DATE:

THE PURPOSE OF THIS FORM IS TO SIMPLIFY THE FILING REQUIREMENTS. IT DOES NOT REPLACE THE NEED FOR COMPETENT LEGAL ADVICE.

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CERTIFICATE OF AUTHORITY

Sample #9

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF AUTHORITY

The above-named FOREIGN FOR-PROFIT CORPORATION was duly filed in accordance with New Jersey State Law on 09/10/2009 and was assigned identification number Following are the articles that constitute its original certificate.

1. Name:

2. Registered Agent:

3 Registered Office:

4. Business Purpose:

5. Incorporated Under the Laws of:

6. Main Business Address:

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 11th day of September, 2009

R. David Rousseau
State Treasurer

Certificate Number: 113273320
Verify this certificate online at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

CERTIFICATE OF LIABILITY INSURANCE

Sample #10

ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) (Complete)

PRODUCER: (Complete) Agent's Name, business address and telephone number.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: (Complete)	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

INSURED: (Complete) Insured's Name, Business Name(s), Street Address and application or license number if applicable

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY	(Complete)	(Complete)	(Complete)	EACH OCCURRENCE $ 500,00
	X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) $ 50,00
	CLAIMS MADE X OCCUR				MED EXP (Any one person) $ 5,00
					PERSONAL & ADV INJURY $ 1 million
					GENERAL AGGREGATE $ 2 million
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC				PRODUCTS - COMP/OP AGG $ 1 million
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) $
	ANY AUTO				
	ALL OWNED AUTOS				BODILY INJURY (Per person) $
	X SCHEDULED AUTOS				
	X HIRED AUTOS				BODILY INJURY (Per accident) $
	X NON-OWNED AUTOS				
					PROPERTY DAMAGE (Per accident) $
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT $
	ANY AUTO				OTHER THAN AUTO ONLY: EA ACC $ / AGG $
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE $
	X OCCUR CLAIMS MADE				AGGREGATE $
	DEDUCTIBLE				$
	RETENTION $ Complete				$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS / OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT $
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE $
	OTHER				E.L. DISEASE - POLICY LIMIT $

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

New Jersey Office of the Attorney Geneal
Division of Consumer Affairs
Office of Consumer Protection
Regulated Business Section - Attn: Home Improv. Unit
124 Halsey Street
Newark, NJ 07102

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Sign - Agent

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SAMPLE FORMS