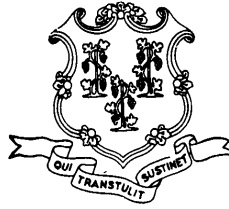


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 License Services Division
 450 Columbus Blvd, Ste 801
 Hartford, CT 06103
 Email: dcp.occupationalprofessional@ct.gov
 Web site: www.ct.gov/dcp



For Official Use Only

Occupational Trade License Reinstatement Form

Instructions:

- A license may be reinstated provided a completed reinstatement form and all applicable fees are submitted **not later than five years after the date of expiration of the license**.
- Return this completed form with the applicable fee to the above address.
- A completed reinstatement form and with applicable fee(s) will reinstate the indicated license to the current renewal year.

Reinstatement Fees:

- **Contractor:** A total **reinstatement fee of \$165.00 (\$150.00 plus \$15.00 late fee) for each one-year period of expiration** must accompany this form.
- **Journeyman:** A total **reinstatement fee of \$132.00 (\$120.00 plus \$12.00 late fee) for each one-year period of expiration** must accompany this form.
- Checks or money orders should be made payable to *"Treasurer, State of Connecticut."*

Continuing Education:

- If your license requires continuing education, you must have the required hours completed prior to submission of this form to be eligible for reinstatement. Requirements can be found at www.ct.gov/dcp.

License Number to be Reinstated	Expiration Date of License
	<input type="checkbox"/> Contractor <input type="checkbox"/> Journeyman

Applicant Information

Name				
Residence Street Address		City	State	Zip Code
Telephone Number	Email Address		Date of Birth	
Mailing Address (if different than above)				
Street Address		City	State	Zip Code
Have you been convicted of a felony crime since the date of last application?				
<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, submit a completed Criminal Conviction Worksheet with this form. The worksheet can be found at www.ct.gov/dcp/conviction .				
If applicable, have you completed the required continuing education prior to submission of this reinstatement form?				
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (none required for this license)				
Please provide the reason why you failed to renew your license by the expiration date (attach sheets as necessary):				
Please provide an explanation as to your work related experience in your trade since your license expired (attach sheets as necessary):				

Certification

Under penalty of false statement, a class A misdemeanor, I attest that the information provided in this application is the truth to the best of my knowledge.

Signature _____

Date _____