



South Carolina Department of Labor, Licensing and Regulation

South Carolina Contractor's Licensing Board

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11329 • Columbia • SC • 29211

Phone: 803-896-4686 • Contact.CLB@llr.sc.gov • Fax: 803-896-4814

llr.sc.gov/clb

**GENERAL AND MECHANICAL CONTRACTORS
PRIMARY QUALIFYING PARTY (PQP)/ QUALIFYING PARTY (QP)
COMPANY ACKNOWLEDGEMENT AFFIDAVIT (DOC. 190)**

☐ PRIMARY QP (PQP) ☐ ADDITIONAL QP (QP)

Name: _____ License No.: _____
(If issued)

Company Information:

Legal Name/Company Name: _____

DBA Name (if different): _____ License No.: _____

OWNER/PRESIDENT/AUTHORIZED PARTY ATTESTATION

I, the owner/officer/partner/member having full and complete authority to sign on behalf of the above named company, certify that the individual submitting the [Primary Qualifying Party \(PQP\) and Qualifying Party \(QP\) Initial Application \(Doc 168\)](#), [Primary Qualifying Party and Qualifying Party Revision Application \(Doc 181\)](#), or [Dual Primary Qualifying Party Affidavit of Eligibility \(Doc 173\)](#) serves in a management capacity and they are actively involved in management, supervision, and operations for the work undertaken by the licensee/applicant. I acknowledge that by completing this application, they are requesting to be designated as a primary qualifying party/qualifying party for my license. I understand that if approved, this individual will become a certificate holder of my license and that providing false or inaccurate information may result in the cancellation or denial of a license or certificate issued pursuant to this application and may be subject to civil and criminal proceedings.

Owner/President/Authorized Party Name (Print): _____

Signature: _____ Title: _____ Date: _____