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## **RECIPROCITY INFORMATION**

The State of Mississippi has entered into reciprocal agreements with the following licensing boards:

**Alabama General Contractors Board** – Mechanical and Plumbing excluded

**Alabama Board of Heating and Air Conditioning Contractors**

**Alabama Electrical Board**

**Arkansas Contractors Licensing Board** – Mechanical and Electrical excluded

**Louisiana Licensing Board for Contractors** – Mechanical excluded; Electrical excluded unless exam taken in LA

**North Carolina Electrical Contractors Board**

**South Carolina Contractors Licensing Board** – Building (unlimited), master electrician exams only. \*Only PSI, Exuperior, Block or NAI exams accepted

**Tennessee Board for Licensing General Contractors**

Reciprocity pertains to trade EXAMINATIONS only and does not minimize the ability of the State of Mississippi to investigate the applicant in any way. The contractor must make application to the Mississippi State Board of Contractors and meet all other requirements of the board before a Certificate of Responsibility Number will be issued.

In order for the Mississippi State Board of Contractors to consider reciprocity for a company the following requirements must be met.

1. A contractor must **complete and submit an application along with all financial requirements and must hold a current license for the past 3 consecutive years with one of the boards named above.** The applicant must **be free of any disciplinary actions** taken against it during the 3 year consecutive period of licensure.
2. **The applicant must show proof of licensure with one of the boards referenced above by providing the completed verification form (attached).** The Mississippi State Board of Contractors retains the authority to require the applicant to provide all necessary information to show cause for the issuance of a contractor's license in the state of Mississippi.

**NOTE: Applicant must complete Part 1 of the attached verification form and mail to one of the above named states. Reciprocity does not apply to any states or agencies not listed above.**

# MISSISSIPPI STATE BOARD OF CONTRACTORS

POST OFFICE BOX 320279

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## I. REQUEST FOR VERIFICATION OF LICENSE

*Instructions to Applicant for Verification: Complete the top portion of this request.*

*Mail to the state in which you now hold a license for completion of Part II*

COMPANY/INDIVIDUAL NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

I am requesting licensure in the State of Mississippi. Please verify my licensure in your state.

\_\_\_\_\_  
Signature of Applicant

\$50.00 (per exam waived)

## II. VERIFICATION OF LICENSE

*To verifying State: Please furnish the information requested and sign. Return the document to the applicant to be included in his application.*

Company/Individual Name \_\_\_\_\_

License Number \_\_\_\_\_ Date License was first issued \_\_\_\_\_

Expiration date \_\_\_\_\_ Current Status \_\_\_\_\_

Classification(s) Held \_\_\_\_\_

Licensed By: \_\_\_ Waiver (basis on Waiver) \_\_\_\_\_

\_\_\_ Endorsement from What State \_\_\_\_\_

\_\_\_ Exam. Name of Qualifying Party \_\_\_\_\_

Type of Exam (s) taken (e.g. NAI, Block, In-house) \_\_\_\_\_

Exams taken and scores \_\_\_\_\_

Disciplinary Action: \_\_\_\_\_

\_\_\_\_\_  
Signature

Title \_\_\_\_\_

Agency \_\_\_\_\_