



STATE OF TENNESSEE
 DEPARTMENT OF COMMERCE AND INSURANCE
BOARD FOR LICENSING CONTRACTORS
 500 JAMES ROBERTSON PARKWAY
 NASHVILLE, TENNESSEE 37243-1150
 (615) 532-3983 or (800) 544-7693 or FAX - (615) 532-2868
<http://tn.gov/commerce/boards/contractors/>
 Email: Katherine.Holliman@tn.gov

POWER OF ATTORNEY

Know all that I, _____, of _____,
 (Owner/Officer Name) (County)
 _____, of _____ do hereby appoint:
 (State) (License/Company Name)

 (Qualifying Agent Name or Officer) (Title) (Date of Employment)

Above named is at least 18 years of age and a full time employee, is authorized to act as qualifying agent (QA) on the company's behalf, to take the examinations(s) and/or interview, as required for a Tennessee contractors license. Pursuant T.C.A. §62-6-115, employee/officer has sufficient knowledge to bind the corporation or partnership.

This designated qualifying agent _____ ***IS** or _____ **IS NOT** listed as the QA for another licensee (attach explanation if listed on another license in Tennessee). I understand should the qualifying agent leave the company, pursuant T.C.A. §62-6-115, the Board must be notified within 10 days; another individual must be designated to pass the examinations within 90 days, or the license is invalid.

 Owner/Officer - Signature Qualifying Agent - Signature

Affirmed, witnessed and subscribed before me this ____ day of _____, 20__.

 My Commission Expires: _____

Notary Public
 -(Seal)-

*If you checked "IS" listed on another contractor's license, what is the license ID#000_____.
 A Qualifying Agent cannot be listed on more than one license unless they are a majority owner or their license is inactive/retired. Please submit an explanation.

(To be completed by entity appointing a non-owner
 full time employee or officer as qualifying agent for testing and/ or board interview)