



**MANAGER LICENSE APPLICATION ADDENDUM
COMPANY PRINCIPAL ACKNOWLEDGEMENT**

THIS ADDENDUM TO THE APPLICATION IS REQUIRED FOR ALL “NON-PRINCIPAL” EMPLOYEES TO BECOME LICENSED. THE LICENSE TYPE WHEN ISSUED WILL BE “COMPANY MANAGER.” A PRINCIPAL IS REQUIRED TO HOLD THE PRIMARY LICENSE FOR EVERY ROOFING COMPANY PROGRAM PARTICIPANT.

1. Roofing Company Name (include Legal and DBA names):

2. Roofing Company Principal Name and Title

3. Business Mailing Address: (P.O. Box can be used for this address)

Number, Street Name, Suite Number/Apartment Number

City _____

State _____

Zip Code _____

4. Business Phone Number:

(_____) _____

5. Principal Cell Phone Number:

(_____) _____

6. Principal Email Address:

7. License Applicant Name and Title

8. STATEMENT OF PRINCIPAL

As a Principal of the Roofing Company for which the above License Applicant has applied and qualifies under this program, I fully understand that the license belongs exclusively to the license holder and **not the company**. The license will remain in effect so long as the license holder and the roofing company both maintain the requirements outlined in the program guidelines. I acknowledge that in the event the license holder leaves the employment of this roofing company, he/she can request to transfer this license to another qualifying company. I understand that I cannot prevent, or request the denial of, a qualifying transfer without evidence of the license holder's non-compliance with the program guidelines or Code of Ethics. In the event of a transfer of the license, I agree to stop using this holder's license number in any form of company marketing or solicitation. I acknowledge that I have read the RCAT License Roofing Contractor Program Guidelines and consent to the processing of this license under the terms outlined therein.

Principal Signature _____

Date _____

9. NOTARY AFFIDAVIT

State of Texas; County of _____

Before me, a Notary Public, on this day personally appears _____ known to me (or provided to me on the oath of _____) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expresses.

Given under my hand and seal of office _____ day of _____ A.D., 20_____.

Notary Public, State of Texas

(Seal or Stamp here)

My Commission Expires the _____ day of _____ 20_____.