



TEXAS DEPARTMENT OF LICENSING AND REGULATION

AIR CONDITIONING AND REFRIGERATION CONTRACTOR
REQUEST FOR REVISION

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Pursuant to Section 75.70(o) of the Texas Air Conditioning and Refrigeration Contractors License rules, a licensee shall notify the Department, in writing, within ten days of any change in permanent mailing address, company location, company telephone number or change in assignment of license.

To request a revision of business information on your license, this completed form must be accompanied by:

- a certificate of insurance reflecting the change of information, and
a \$25 reprint fee.

To request a change in the permanent mailing address only, submit this completed form and the \$25 reprint fee.

Please change my [] Business address [] Business name [] Business phone
[] Permanent mailing address [] Other _____

OLD INFORMATION

NEW INFORMATION

Four horizontal lines for entering old information.

Four horizontal lines for entering new information.

By signing this form, I request that my Texas Air Conditioning and Refrigeration Contractors License be revised.

Licensee Name (Please print)

License Number

Signature of Licensee

Date