



**COMMONWEALTH OF PENNSYLVANIA
OFFICE OF ATTORNEY GENERAL**

Bureau of Consumer Protection
15th Floor Strawberry Square
Harrisburg, PA 17120
HelpLine: 717-772-2425
<http://www.attorneygeneral.gov>

Home Improvement Contractor Registration Application Instructions

Anyone who owns or operates a home improvement business or who offers, performs, or agrees to perform home improvements in Pennsylvania **must** register with the Office of Attorney General unless they are specifically exempted¹ under Pennsylvania's Home Improvement Consumer Protection Act ("HICPA"). Any home improvement contractors who are not registered will be prohibited from performing home improvements in Pennsylvania.

Due to the volume of hard copy applications we receive, contractors are encouraged to apply online for faster processing. Apply online at <https://hic.attorneygeneral.gov>. However, if you apply by mail, you should allow several weeks for processing once a completed application has been submitted. **Incomplete applications will delay registration.**

New applicants for registration will be issued a unique Pennsylvania Home Improvement Contractor number (PA-----). Renewal applicants will continue to use their previously issued registration number. This number must be included in all advertisements, contracts, estimates and proposals used by the business in Pennsylvania.

Home Improvement contractors must review HICPA and use contracts that comply with the requirements set forth in the law. Failure to comply with HICPA can lead to civil and criminal penalties and may result in your contract being voidable and unenforceable.

General Instructions for Completing Pennsylvania's Home Improvement Contractor Registration Application

Please read the instructions for each section of the application before completing the application form. Please note that the pages may be double-sided.

Please type your answers or print clearly in blue or black ink.

You must complete each section of the application noted with an (*). If a section does not apply to your business, write "N/A". **Incomplete applications will delay registration.**

The signed original application must be filed with the Office of Attorney General, Bureau of Consumer Protection, 349 Walnut Street, 15th Floor, Strawberry Square, Harrisburg, PA 17120 - ATTN: Home Improvement Contractor Registration.

Changes to the information submitted in the application can be made in writing to the address noted above or online at <https://hic.attorneygeneral.gov>.

¹ Under the Home Improvement Consumer Protection Act, individuals performing home improvements valued at less than \$5,000 in a calendar year are not required to register. Home Improvement retailers with a net worth of \$50 million or more also do not need to register; however, subcontractors and independent contractors performing home improvements for these retailers must be registered.

Detailed Instructions for Completing Pennsylvania's Home Improvement Contractor Registration Application

Section A – Form/Business Type *

Check the box indicating the appropriate application you are submitting:

- New Registration
- Renewal or Update. If you are renewing or updating your current registration, provide your current Home Improvement Contractor Registration Number. (PA-----). **If you are updating information on your registration, payment is not required.**

Check the appropriate type of business you own:

- If you are a sole proprietor, check “Individual.”
- If you are registering a corporation or other business entity, check the box that corresponds to the type of business.

Section B – Business Information *

(Individuals, Corporations, Limited Liability Companies, General Partnerships, Limited Partnerships, and Joint Ventures)

For businesses filing as ‘Individual’ under Section A, you must provide your first and last name. For all other business types, provide your business name. **The name provided in this section will be the name that appears on your registration certificate.**

The ‘In-State’ designation is required. This is the location for the home office of the business.

The business/ mailing addresses are required. A business phone number and email address are also required. The Federal Employer Identification Number (FEIN) and website are optional.

The description of business contains goods and services offered or provided in Pennsylvania by your business.

If your business operates under a business name other than what was provided in Section B, please provide the name(s) that are used. *Please Note: Pennsylvania law requires any business name, other than a first/last name, to be registered with the Pennsylvania Department of State (DOS) **before** those names may be used. Forms may be obtained online, www.dos.pa.gov/businesscharities/business, or by calling The Pennsylvania Bureau of Corporations and Charitable Organizations at 717-787-1057.*

If the business operates at multiple locations, please provide the additional addresses in the spaces provided.

Each business applicant must check **all** boxes to the background information concerning the business.

A resident agent or registered office must be listed if your business is not based in Pennsylvania. This is the person/office authorized by your business to accept service of legal papers. A listing of possible registered offices can be found at <https://pa.gov/agencies/dos/programs/business/information-services>. *Please Note: This section **only** applies to corporations, limited liability companies, and limited partnerships.*

Section C – Point of Contact *

This is the person authorized by your business to be contacted by our office.

Section D – Business Applicant *

The business must provide all owner data and check **all** boxes under the personal background information. *Please Note: Social Security Number, driver’s license information, home address, personal telephone number and email address will not be publicly disclosed.*

If the owner does not have a driver’s license, the business must provide the number and issuing state of a state-issued identification card or passport information. *Please Note: An owner with either of these types of identification are required to submit a copy of their ID card or passport with their application.*

If the owner operated a home improvement business in the past, the name and address of the business must be listed in the application. Check **all** boxes under prior business background information. *Please Note: If there are multiple prior businesses, please attach additional sheets of paper as necessary.*

Section E – Associated Business Applicant *

Each additional owner, officer, manager, partner, or party to a joint venture must provide data and check **all** boxes under the personal background information. The business must provide all owner data and check **all** boxes under the personal background information. *Please Note: Social Security Number, driver’s license information, home address, personal telephone number and email address will not be publicly disclosed. In addition, if there are multiple associated business applicants, please attach additional sheets of paper as necessary.*

If an associated business applicant does not have a driver’s license, the business must provide the number and issuing state of a state-issued identification card or passport information. *Please Note: An associated business applicant with either of these types of identification are required to submit a copy of their ID card or passport with their application.*

If the associated business applicant operated a home improvement business in the past, the name and address of the business must be listed in the application. Check **all** boxes under prior business background information. *Please Note: If there are multiple prior businesses, please attach additional sheets of paper as necessary.*

Section F – Shareholder/Equity Owner Information

Corporations, limited liability companies and limited partnerships must provide the names of all directors or parties holding a 5% or greater equity interest.

Section G – Other Registrations or Licenses

If the individual or business is currently registered or licensed as a contractor in any other political subdivision, agency, municipality, state, or country, including a local or municipal registration or license, please complete this section, for each such license or registration. **HICPA requires you to report any disciplinary action related to such registration(s) or license(s) listed in this Section, to the Bureau of Consumer Protection, in writing, at the address noted above, within 90 days of final disposition.**

Section H – Insurance *

Commercial General Liability Coverage

- The name of the insured must be in the business name. *If you are registered as an Individual, the name of the insured must be in the owner's name. If you are registered as any other business type, provide the business name.*
- HICPA requires minimum coverage in the amount of at least \$50,000 for bodily harm (personal injury) and at least \$50,000 for property damage.
- When selecting this type of insurance coverage, a valid Certificate of Insurance must be submitted along with your application.

Self-Insurance Coverage

If you wish to register as self-insured, you must complete the Home Improvement Consumer Protection Act Self-Insurance Certificate of Coverage and Attestation and attach it to this application.

The Bureau requires that every home improvement contractor who is self-insured include a statement in every home improvement contract that he/she is self-insured, and provide the name, address, and telephone number of the organization providing the self-insurance.

Section I – Certifications *

Only an authorized party may sign the certification to certify that the information contained in the application is truthful and accurate. The certification must be signed by one of the individuals listed in this application, i.e. Point of Contact, Owner or Business Applicant. The authorized party must print his/her name, sign and date the certification. **It is a crime to provide false or misleading information to this office.**

PLEASE SEE ADDITIONAL PAGE FOR FURTHER INSTRUCTIONS

This checklist is not the HIC application. It is provided to assist you with completing your application.

In order to expedite the issuance of your registration certificate, please review this checklist and make sure your application contains all of the following:

- _____ The type of business (Section A)
- _____ The name and contact information for the business (Section B)
- _____ A description of your business (Section B)
- _____ Any fictitious names, d/b/as or trade names used by the business (Section B)
- _____ A list of any additional business addresses used by the business (Section B)
- _____ Check all boxes under Business Background Information (Section B)
- _____ The resident agent for out-of-state corporations, limited liability companies and limited partnerships (Section B)
- _____ The name and contact information for the business' Point of Contact (Section C)
- _____ The name, contact information for the Business Applicant/Owner (Section D)
- _____ Check all boxes under the Personal Background Information (Section D)
- _____ The name and contact information for each Associated Business Applicant (Section E)
- _____ Check all boxes under the Personal Background Information (Section E)
- _____ Names for all directors or parties holding a 5% or greater equity interest in the business (Section F)
- _____ A list of all home improvement registrations and licenses issued to the applicant in other states or countries, including federal, local or municipal registration or licenses (Section G)
- _____ Insurance information for the business (Section H)
- _____ Certification signed and dated by an authorized party (Section I)

A check or money order in the amount of \$100 payable to the “Commonwealth of Pennsylvania”, which is NON-REFUNDABLE.

Send your completed application and payment to:

**Office of Attorney General
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349 Walnut Street
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ATTN: Home Improvement Contractor Registration**

For more information, visit www.attorneygeneral.gov or call our HelpLine at 717-772-2425.