

APPLICATION TO REGISTER AS A HOME BUILDER
IN THE STATE OF MARYLAND

Information Form for Principal of Home Builder

Please fill out a separate form for each principal. Make additional copies of this form as needed.

Please type or print in ink. If you need more space for any question, please answer on a separate page, number your answer, and attach it to the application.

Please answer every question clearly and completely. If there is no responsive information to a question, please write N.A. after the question (for example, if you do not have an e-mail address). **Each principal must include their social security number in the space provided** (unless the principal is a business entity).

Please provide this office with any future changes to the information provided in this form within 10 working days of the changes taking effect.

1. Name of applicant: _____

2. Name of principal: _____

3. Principal's address: _____
(For individuals, enter home address)

4. Principal's phone number: _____

5. Principal's fax number: _____

6. Principal's e-mail address: _____

7. If principal is an individual, the principal's social security number:

8. If principal is a business entity, the principal's federal employer identification number:

9. Check the box or boxes that describe why the person is a principal of the applicant.

- sole proprietor of the applicant
- officer of the applicant
- director of the applicant
- general partner of the applicant
- limited liability company manager of the applicant
- a person with at least 10 percent ownership in either the applicant or a subsidiary of the applicant.
- the parents, spouses, and children of a principal who have a combined 10 percent ownership in the applicant or a subsidiary of the applicant. Please state the name of the principal to whom this principal is related and the nature of that relationship: _____

10. If the principal has at least a 10 percent ownership in a subsidiary of the applicant or if the principal's parents, spouses, and children have a combined 10 percent ownership in a subsidiary of the applicant, please list the subsidiary's name, address, and federal employer identification number.

11. Has the principal ever been a principal in an entity (other than this applicant) that previously applied for registration?

- No
- Yes. If yes, please provide the identity of that entity and its registration number.

12. Has the principal ever been a principal of a home builder that had its registration or license denied, suspended, or revoked by another state or jurisdiction for any cause?

- No
- Yes. If yes, please state the name of the builder and the state or jurisdiction in which the denial, suspension, or revocation occurred.

Builder

State/Jurisdiction

13. Does the principal have any existing unsatisfied judgments, arbitration awards or tax liens?

No

Yes. If yes, please list and attach a copy of the unsatisfied judgment(s), arbitration award(s) or tax lien(s) existing against the principal and complete a **Legal Proceedings Form** for each.

14. Does the principal have any lawsuits and/or arbitration proceedings involving consumers and the principal that were pending or filed on or after January 1, 2001?

No

Yes. If yes, please list the lawsuit(s) and/or arbitration proceeding(s) and complete a **Legal Proceedings Form** for each.

15. Does the principal have any lawsuits or criminal proceedings that were pending or filed on or after January 1, 2001 that relate to the principal's activities as a builder?

No

Yes. If yes, please list the lawsuit(s) and /or criminal proceeding(s) and complete a **Legal Proceedings Form** for each.

16. Has the principal or an entity of which the principal was an officer ever filed for bankruptcy or been the subject of a bankruptcy or insolvency proceeding?

No

Yes. If yes, please list the bankruptcy proceeding and complete a **Legal Proceedings Form** for each.

I hereby certify, upon personal knowledge and under penalty of perjury, that the information provided on this Information Form for Principal of Home Builder is complete, accurate and true

I also understand that I am under a continuing obligation to notify the Consumer Protection Division of any future changes to the information provided on this form within 10 working days of the changes taking effect.

Dated: _____

Signature: _____

Title: _____