Sample

## INITIAL WORKERS' COMPENSATION EXEMPTION REGISTRATION RENEWAL FORM (ss-4528)



ss-4528 (1/13)

Business Services Division

## Tre Hargett, Secretary of State State of Tennessee

State of Tennessee 312 Rosa L. Parks Ave., 6th Fl. Nashville, TN 37243 (615) 741-0526

Filing Fee for Unlicensed Contractor \$100.00 Filing Fee for Licensed Contractor \$50.00

For Office Use Only

RDA 1762

	Filing Fee for Licensed Contra	etor \$50.00	
Registration Control #: Found or	APPLICANT INFORM	lation Erent exe	mption
First:			
Date of Birth:			SSN:
Phone: ()	Email:		
Physical Address:	City:	ST:	Zip:
Mailing Address:	City:	ST:	Zip:
INITIAL I	REGISTRATION EXPIR	RATION DETAILS	
My initial registration expires: -	- Comp	olete	
cK □ I am renewing within 60 days prior to th			
	LICENSING CONTRAC	CTORS INFORMAT	TION (CHECK ONE)
INITIAL STATE BOARD FOR			
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