

Contractor License Status Verification

Date: _____

To Whom It May Concern,

This letter is to verify the status of the contractor license for:

Contractor Name: _____

License Number: _____

Issued By: _____

Expiration Date: _____

The above-mentioned contractor is currently:

- Active
- Inactive
- Expired

If you have any further questions or require additional information, please do not hesitate to contact us at:

Contact Information: _____

Thank you for your attention to this matter.

Sincerely,

Signature:

Full Name: _____

Title: _____

Company Name: _____

Contact Number: _____