STATE OF CONNECTICUT
Department of Consumer Protection
License Services Division
450 Columbus Blvd, Ste 801
Hartford, CT 06103

Mailing Address:

Location Address:

Indicate an email address to be used for all correspondence:

Renewal Notice for Renovator of Bedding & Upholstered Furniture

May 1, 2024 – April 30, 2025

Indicate Connecticut License Number to be Renewed		Expiration Date		Total Fee Due
		04/30/2024		**$50.00**

Please note, this form is only to be used for licenses expiring 04/30/2024. A reinstatement form must be completed for all licenses that have expired within three years of expiration or you must reapply. Information and forms are available on our website at www.ct.gov/dcp.

- **Renew by Mail:** To renew by mail, complete this renewal notice and return with a check drawn on a US Bank or International Money Order for the applicable fee made payable to *"Treasurer, State of Connecticut"* and mail to the above address.

- **Renew Online:** To renew online with a credit card, go to our website at www.elicense.ct.gov and login with your User Id and Password or Fast Track Renewal information. Once you have completed the login process, select Online Services and then click Renewal to begin. If you do no have your necessary login information to renew online, email dcp.online@ct.gov for assistance.

- **Change in Ownership:** If there has been a change in ownership, **do not renew this license**. This license is non-transferable. To obtain a new application, go to our website at www.ct.gov/dcp. Questions can be emailed to the Food & Standards Division at dcp.productsafety@ct.gov.

- **Late Renewal:** A total renewal fee of $60.00 will be due if this renewal is not paid and/or received by the expiration date. If this license is not renewed by the expiration date and you continue to practice or engage in such work, you may be in violation of the Connecticut General Statutes and subject to all penalties.

Certification

I certify, under penalty of law that the information provided on this form is the truth to the best of my knowledge.

Signature _____ Title _____ Date _____