



P.O. Box 305025  
Montgomery, Alabama  
36130-5025

STATE OF ALABAMA  
BOARD OF HEATING, AIR CONDITIONING &  
REFRIGERATION CONTRACTORS

Phone: (334) 241-0840  
Fax: (334) 265-0570  
www.hacr.alabama.gov

**AFFIDAVIT OF UNDERSTANDING**

I, \_\_\_\_\_, state on oath and affirm:  
(Name)

1. I am \_\_\_\_\_ of \_\_\_\_\_.  
(Position) (Name of Company)

I am currently a licensed contractor under the laws of \_\_\_\_\_.  
(State)

I have been a licensed contractor for \_\_\_\_\_ years.  
(Number of Years)

2. I am seeking to be licensed as a heating and air conditioning and/or refrigeration contractor in the State of Alabama under its reciprocal agreement with \_\_\_\_\_. I certify that I meet all requirement of the reciprocal agreement.  
(State)

3. Although I am not required to pass the Written Examination before becoming licensed in Alabama, I recognize that I am not exempted from the laws of the State. By executing this affidavit, I agree to comply with all laws, rules, and regulations of the State of Alabama Board of Heating, Air Conditioning and Refrigeration Contractors.

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn before me this \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature of Affiant

Commission expires \_\_\_\_\_