



**ICC CONTRACTOR
ADDRESS RECORD**

**IMPORTANT!! IT IS NECESSARY FOR YOU TO COMPLETE THE
FOLLOWING:**

Name: _____

Mailing Address: _____

City, State, Zip: _____

Social Security Number (optional): _____

Daytime Phone Number: _____

Evening Phone Number: _____

If you have **not** received any of the below information and wish to have a copy mailed to the address above, please mark what information you are requesting to be mailed.

_____ Confirmation letter _____ Result letter

Exam date: _____

Exam Title: _____

Other (please specify): _____

**Please sign your name to authorize the above information to be updated in ICC's records.
Thank you.**

*Signature: _____ Date: _____

***MUST BE FILLED OUT**

Mail to: ICC – Birmingham District Office
 Attn: Certification and Testing
 900 Montclair Road
 Birmingham, Alabama 35213

Or Fax To: (205) 599-9884