



**Alabama Licensing Board for General
Contractors**

445 Dexter Ave, Suite 3060 Montgomery, AL 36104
Phone: (334) 272-5030
Fax: (334) 395-5336



LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: **LEMOINE DISASTER RECOVERY
LLC** License #: **58403**

I authorize the Alabama Licensing Board for General Contractors to release information in regards to the status of my license.

ALABAMA BOARD VERIFICATION:

LICENSE #: **58403** Expiration Date: **3/31/2025**

Specialty: **ADM: NEW ADMINISTRATIVE, BC: BUILDING CONSTRUCTION, H/RR:
HEAVY AND RAILROAD, HS: HIGHWAYS AND STREETS, MU: MUNICIPAL
AND UTILITY**

Board Signature: _____
**Tiffany Loveless
Executive Director**

Date: **04/24/2026**