



**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: **COMPLETE CARE AND REAPIR LLC** License #: **S-59973**

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

**ALABAMA BOARD VERIFICATION:**

LICENSE #: **S-59973**

Expiration Date: **10/31/2025**

Specialty: **SUBCONTRACTOR: DOORS, WINDOWS AND GLASS, DRYWALL AND METAL STUDS, EARTHWORK, FRAMING, MASONRY, PAINTING AND WALL COVERINGS, ROOFING AND SHEET METAL**

Board Signature: \_\_\_\_\_  
**Tiffany Loveless**  
**Executive Director**

Date: **04/24/2026**