



Instructions for Completing the NCIR-OL Report

Introduction

The Report by Occupational Licensing Boards of their Licensees (NCIR-OL) has two required parts: [Occupational Licensing Board Submitter Information](#) and the licensee data file, [Occ Lic Board Data](#). This document provides instructions for completing the data that should be included in each column for the licensee data portion of the NCIR-OL report.

Note: Do not make changes to the Excel template provided by the Department. Each Excel file must contain only one worksheet. Excel files with multiple worksheets will not be accepted. Do not include trailing space(s) at the end of the worksheet name.

Occupational Licensing Board Submitter Information

The [Information Reporting Application](#) contains an Occupational License Board Submitter Information screen where you must provide basic information about the licensing board required to file the report. Please see the [Submission Step-by-Step Guide](#) for more information.

Note: Beginning with Tax Year 2023, a Submitter File is no longer needed because you will enter the information into the Occupational License Board Submitter Information screen within the Information Reporting Application.

Occupational Licensing Board Data File

The Data File contains information about each licensee to whom the licensing board has issued a license. **Do not modify any of the column headers, remove columns, or change the order of any columns in the template.**

Column	Instruction
Board	Enter the legal name of the licensing board.
BoardTIN	Enter the 9-digit FEIN of the board. Do not enter dashes or spaces. Note: This column must be formatted as Text to ensure leading zeroes in the ID number are not dropped.
TIN	Enter the 9-digit SSN of the licensee. Do not enter dashes or spaces. Note: This column must be formatted as Text to ensure leading zeroes in the ID number are not dropped.
Last	Enter the last name of the licensee.
First	Enter the first name of the licensee.
Middle	Enter the middle name or middle initial of the licensee, if applicable.
Suffix	Enter the suffix of the licensee, if applicable. For example, Jr, Sr, III, etc.
BirthDate	Enter the birth date of the licensee using a format of YYYYMMDD. For example, enter 19500302 if the birth date is March 2, 1950.
Employer	Enter the name of the licensee's employer.

EmpCat	Enter Public if the licensee’s employer is a government entity; otherwise, enter Private.
LicType	Enter a description of the primary license type as shown on the license. For example, enter General Contractor, Attorney, Architect, etc.
LicSubcat	Enter the license/endorsement subcategory, if applicable. For example, enter Full, Restricted, Unrestricted, Limited, Unlimited, etc.
LicNo	Enter the license number as shown on the license. If no license number exists, enter the account number or ID number the board uses to identify the license/licensee.
LicIssueDate	Enter the license issuance date using a format of YYYYMMDD. For example, enter 19880302 if the license was issued on March 2, 1988.
LicExpDate	Enter the license expiration date using a format of YYYYMMDD. For example, enter 20300302 if the license expires on March 2, 2030.
LicStat	Enter the status of the license/certification. For example, enter Active, Inactive, Suspended, Certified, etc.
PrimPrac	Enter the licensee’s primary area of practice/qualification, if applicable. For example, enter Internal Medicine, Residential Construction, etc.
SecPrac	Enter the licensee’s secondary area(s) of practice/qualification, if applicable. For example, enter Cardiology, Pulmonary Disease, Commercial Construction, etc.
BusPhone	Enter the 10-digit business phone number of the licensee.
Add1	Enter the first line of the licensee’s address.
Add2	Enter the second line of the licensee’s address, if applicable.
Add3	Enter the third line of the licensee’s address, if applicable.
City	Enter the city of the licensee’s address.
St	Enter the state of the licensee’s address.
Zip	Enter the 5-digit or 9-digit zip code of the licensee’s address. Do not enter dashes.
County	Enter the county name of the licensee. For example, enter Mecklenburg, Bladen, etc.
DisAct	Enter Yes if the licensee is subject to any current disciplinary action; otherwise, enter No.

The following is an example of a completed Data File for a fictitious licensing board. Please note that the two screen shots below are taken from a single row within the Data File. The screen shot is broken down into sections for better visibility.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Board	BoardTIN	TIN	Last	First	Middle	Suffix	BirthDate	Employer	EmpCat	LicType	LicSubcat	LicNo	LicIssueDate	LicExpD
2	Example Board	123456789	111111111	Wheeler	Kevin	M	III	19730511	Going The Extra Smile, Inc	Private	D	C	999999	20020916	20320531
3	Example Board	123456789	222222222	Johnson	Matthew	H	Jr.	19740101	Struck By Whitening, Inc	Private	D	C	888888	20110714	20320531
4	Example Board	123456789	333333333	White	Pearl	E		19761101	Pearl E White, DDS	Private	H	L	777777	20110708	20320531
5	Example Board	123456789	444444444	Tooth	John	Wilkes		19890505	The Tooth Booth, Inc	Private	H	L	666666	20150611	20320531
6	Example Board	123456789	555555555	Lars	Moe			19751024	Moe Lars, DDS	Private	H	L	555555	20020627	20320531

N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA
IssueDate	LicExpDate	LicStat	PrimPrac	SecPrac	BusPhone	Add1	Add2	Add3	City	St	Zip	County	DisAct
.20916	20320531	CUR	General Practice		9197541234	100 Cane, Suite 10			Exampleville	NC	28099	Onslow	
110714	20320531	CUR	Pediatric Dentistry		9197544321	300 Main St			Exampleville	NC	28099	Onslow	
.10708	20320531	CUR	General Practice		9107541234	500 Raines St			Example Burbtown	NC	28094	Onslow	
150611	20320531	CUR	General Practice		9107544321	700 Thames St, Suite 101			Exampleville	NC	28099	Onslow	Y
.20627	20320531	CUR	Pediatric Dentistry		2527541234	900 Lane St			Exampleville	NC	28099	Onslow	