

## LICENSE ADMINISTRATION

Contractor Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

License Type: \_\_\_\_\_ Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### General Requirements for All Contractors:

1. Copy of your current State License (DBPR, State Fire Marshall, DACS-Bureau of LP, DHSMV, etc.) or Seminole County Competency Card.
2. Proof of worker's compensation coverage or an exemption certificate and proof of general liability.

### Additional Requirements for Registered Contractors:

1. For initial application or over 90 days expired only: Attach a letter from Florida Jurisdiction or testing agency to verify you have taken and passed the appropriate written exam(s) in the jurisdiction within the State of Florida where your license was issued (to include classification of license type and date passed).
2. Submit this form and accompanying documents in person to the Building Division.
3. And fill out the following:

Have you had disciplinary action in any Florida jurisdiction with-in the past twelve (12) months?

Yes

No

If yes, please list the jurisdiction and actions taken:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NOTE:** License administration is typically on a two year cycle.

Revised 7/8/16