# CONTRACTOR REGISTRATION
# REQUIREMENTS FOR CITY OF FLORIDA CITY

**NO PERMITS WILL BE ISSUED WITHOUT CURRENT REGISTRATION**

## STATE CERTIFIED CONTRACTORS

**A.** Legible color copy of the Qualifier's Driver License
**B.** Current State license
**C.** Current Occupational License
**D.** Current Certificate of Liability Insurance (Certificate holder made out to: City Florida City 404 W. Palm Drive Florida City, FL 33034)
**E.** Current Certificate of Workmen's of Compensation Insurance or Exemption Certificate. (If Exempt, provide certificates for all 3 officers that are exempt).
**F.** Complete Page 2
**G.** A $30.00 Contractor Services Administration Fee is required

**Note: P.O. Boxes will not be accepted as a business address**

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**OR**

## 2. MIAMI-DADE COUNTY CONTRACTORS

**A.** Legible **color** copy of the Qualifier's Driver License
**B.** Current Miami-Dade County Municipal Contractor License
**C.** Current Occupational License (Local Business)
**D.** Current Miami-Dade County Certificate of Competency (**CTQB**)
**E.** Current Certificate of Liability Insurance (Certificate holder made out to: City of Florida City 404 W. Palm Drive Florida City, FL 33034)
**F.** Current Certificate of Workmen's Compensation Insurance or Exemption Certificate.
**G.** Current registration with DBPR (State Registration)
**H.** Complete Page 2
**I.** A $30.00 Contractor Services Administration Fee will be required

**Note: P.O. Boxes will not be accepted as a business address**

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Insurance requirements per the State of Florida for Building and other categories:
General and Building Contractors: (Minimum) $300,000 Bodily Injury and $50,000 Property Damage.
All other Categories: (Minimum) $100,000 Bodily Injury and $25,000 Property Damage

**Return completed page 2 and all required documents to the Building Department - 404 West Palm Drive Bldg # 3 Florida City, FL 33034 - (305)247-8222 – (305)242-8114 Fax**

**Incomplete registration forms will not be processed. You may call the Building Department to check the status 2 business days after submittal. All documents must be legible for us to process the registration. When the registration is complete, we will contact the Qualifier to issue him/her a Personal Identification Number (PIN). The PIN will be needed to request an inspection and will only be given to the Qualifier.**

**Checks must be made to: City of Florida City**

# Scan or attach a legible COLOR copy of Qualifier's Drivers License above this line

**All information must be legibly printed or typed with the exception of the Qualifier's signature**

**The Qualifier's Signature Must Be Notarized**

Company Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Last 4 digits of Qualifier's Social Security Number: _____

Business Phone Number: ( )_____

Business Fax Number: ( )_____

Qualifier's Cell Phone Number: ( )_____

Are permits restricted to qualifier pick-up only? Y____ N ____

Are inspections restricted to qualifier request only? Y____ N ____

Email Address: _____

Qualifier's Signature: _____

_____
**Print Name**

**This foregoing instrument was acknowledged before me this _____ day of _____, 20____,**

**by _____**

_____ **(Seal)**
**Notary Signature**
**Personally known to me_____ or Produced Identification_____ Type of Identification**
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