



APPLICATION FOR VOLUNTARY REGISTRATION OF CONTRACTOR CERTIFICATION

Fictitious Name _____	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">Type of Certification</td> <td style="width: 20%; border-bottom: 1px solid black;">Date</td> <td style="width: 40%; border-bottom: 1px solid black;">Registration #</td> </tr> </table> <p style="text-align: center; margin-top: 5px;">*OFFICE USE ONLY*</p>			Type of Certification	Date	Registration #
Type of Certification	Date	Registration #				
Corporate Name _____	E-Mail Address _____	Business Telephone _____				
Business Location _____	(Street) _____	(City) _____	(State) _____ (Zip) _____			
Mailing Address - If different than business location _____	(Street) _____	(City) _____	(State) _____ (Zip) _____			
Qualifying Agent's Name _____	Business Owner's Name – if different from Qualifier _____					
Qualifying Agent's Home Address _____	(Street) _____	Business Owner's Address _____ (Street) _____				
(City) _____ (State) _____ (Zip) _____	(City) _____	(State) _____	(Zip) _____			
(_____) _____	(_____) _____					
Qualifying Agent's Home Telephone _____	Business Owner's Home Telephone _____					
Qualifying Agent's Signature _____	# of Employees _____					

NOTARY PUBLIC: STATE OF FLORIDA, COUNTY OF _____.

Witness my hand and official seal, this _____ day of _____, 20____, by _____,

who is personally known to me or who has produced _____ as identification.

OFFICIAL NOTARY SEAL:

NOTARY SIGNATURE

PRINTED NAME OF NOTARY

RETURN THIS APPLICATION WITH COPIES OF THE FOLLOWING DOCUMENTS:

- 1) Palm Beach County Certificate of Competency or State License (must be signed by qualifier).
- 2) If Palm Beach County certified, you may also be required to have a State of Florida registration per- FS 489.117.
- 3) Insurance certificate addressed to City of Boca Raton, Business Tax Authority. Insurance limits of not less than \$300,000 for bodily injury & not less than \$50,000 for property damage in each occurrence.
- 4) Worker's Compensation Insurance or State Approved Exemption Certificate.
- 5) Local Business Tax Receipt for business location.
- 6) Certificate of Competency and/or State License, Local Business Tax Receipt and Insurance Certificate must have the same corporate and fictitious name.

* There is no fee to register or renew as a contractor Per House Bill 535 effective July 1, 2016.



Mailing Address
Business Tax Authority
201 W Palmetto Park Rd
Boca Raton, FL. 33432