HENDRY COUNTY BUILDING LICENSING & CODE ENFORCEMENT

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100 EAST EL PASO AVE – CLEWISTON, FLORIDA 33440 – PHONE (863 983-1463 – FAX: (863) 983-1467

State Certified Contractor's Application

(to register existing state certified license)

I. Applicant Name: _____

Type of License:_____

Home Address:_____
Street City State Zip

Mailing Address:_____
Street City State Zip

Social Security Number: _____ - _____ - _____ Date of Birth:_____/_____/_____

Home Phone: ( ) _____ FaxNumber: ( ) _____

Office Phone: ( ) _____ Cell Phone: ( ) _____

II. Company Name: _____
(Name of company to be qualified, fictitious name to be used, or if no company name will be used, write "Individual")

Contractor's License Number: _____

Street Address: _____
Street City State Zip

Mailing Address:_____
Street City State Zip

Office Phone: _____ Fax Number:_____

The following items must be provided to register with Hendry County: A copy of the state license; copy of "QB" license, (if applicable); copy of the qualifiers drivers license; copy of liability and workers compensation insurance policy (with Hendry County made out as the certificate holder); copy of occupational license; notarized form authorizing others to pick up permits (if applicable); and the $30.00 registration fee.

_____ _____
Applicant's Signature Date

State of _____, County of _____
The foregoing instrument was acknowledged before me this _____ day of _____ 200___, by a person who _____

is personally known to me or produced _____as identification and who did take an oath.

_____ Notary Stamp
Notary Public Signature