

OKEECHOBEE COUNTY COMMUNITY DEVELOPMENT
CONSTRUCTION INDUSTRY LICENSING BOARD

1700 NW 9th Avenue, Suite A

OKEECHOBEE, FL 34972

PHONE # 863-763-5548 FAX # 863-763-5276

STATE CERTIFIED CONTRACTORS

DATE: _____
BUSINESS NAME: _____
OWNERS NAME: _____
BUSINESS ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ FAX #: _____
QUALIFIERS NAME: _____
HOME ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
HOME PHONE: _____ CELL #: _____
E-MAIL ADDRESS: _____

PLEASE PROVIDE THIS OFFICE WITH A COPY OF THE FOLLOWING ITEMS:

(NOTE: ALL INFORMATION MUST BE LEGIBLE. ANY MISSING ITEMS WILL RESULT IN A
DELAY IN THE REGISTRATION PROCESS)

- ___ CURRENT STATE CERTIFICATION ISSUED BY STATE OF FLORIDA
- ___ CURRENT BUSINESS TAX RECEIPT (FORMERLY CALLED OCCUPATIONAL LICENSE)
ISSUED BY HOME JURISDICTION (WHERE BUSINESS IS LOCATED)
- ___ CURRENT CERTIFICATE OF LIABILITY, LISTING OKEECHOBEE COUNTY AS THE
CERTIFICATE HOLDER WITH ADDRESS SHOWN ABOVE
- ___ CURRENT CERTIFICATE OF WORKER'S COMP INSURANCE, LISTING OKEECHOBEE
COUNTY AS THE CERTIFICATE HOLDER WITH ADDRESS SHOWN ABOVE OR A
WORKER'S COMP EXEMPTION (NOTE: OUT-OF-STATE PRODUCERS MUST STATE
THAT COVERAGE IS FOR FLORIDA)
- ___ VALID DRIVER'S LICENSE (MUST BE INCLUDED FOR LICENSE HOLDER)
- ___ \$15.00 ADMINISTRATION FEE PER YEAR (LIMIT 2 YEARS)

MAKE CHECKS PAYABLE TO:
OKEECHOBEE COUNTY COMMUNITY DEVELOPMENT DEPARTMENT