

TAYLOR COUNTY

SPECIALTY CONTRACTOR

LICENSE APPLICATION

REQUIREMENTS

1. Minimum 18-years old
2. Proof of 2-years experience in each category requested
3. Submittal of completed application
4. 3-letters of personal credit
5. Completed financial statement
6. Certificate of insurance:
 - a. \$25,000 Liability
 - b. \$10,000 Property DamageNote: Name of insured must reflect the exact name of business organization.
7. Certificate of Worker's Compensation or Worker's Comp Exemption
Note: Applicant will be allowed 30-days to acquire policy or exemption after Board approval for license. License will not become valid until documents are submitted to the Building Department.
8. For a corporation, submit names of all officers of the corporation and percent ownership.
9. License fee of \$25.00 payable upon Licensing Board Approval.
10. Applicants whose business address is located in the unincorporated area of the County must also obtain an Occupational License from the Tax Collector after approval by the Licensing Board.

Name: _____

Address: _____

Phone #: _____

Drivers License: _____

Company Name: _____

LICENSE CATEGORY

MASONRY	
Brick:	
Block:	
Slab:	
Foundation:	
Stucco:	

CARPENTRY (non-structural)	
Decks: (no-roof)	
Door Replacement:	
Window Replacement:	
Ramps: (residential)	

FLOORING	
Vinyl:	
Carpet:	
Tile:	
Wood:	

VINYL SIDING:	
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DRYWALL:	
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PAINTING:	
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CABINetry:	
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GUTTER:	
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INSULATION:	
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GARAGE DOOR:	
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INSURANCE REQUIREMENTS

Attach original from insurance provider

General Liability:	\$25,000
Property Damage:	\$10,000

WORKER'S COMPENSATION

I understand that proof of worker's compensation insurance or worker's compensation exemption must be submitted to the Building Department within 30-days of license approval by the licensing Board.

Signed: _____

CREDIT REFERENCES

	NAME OF FIRM	ADDRESS
1.		
2.		
3.		

Are you presently licensed in any other Counties or Municipalities? Yes: No:

If yes, where: _____
Include copy of license with application

Have you ever failed to complete a construction contract? Yes: No:

Have you ever been refused a contractor's license? Yes: No:

Have you ever had a contractor's license revoked? Yes: No:

Have you ever declared bankruptcy? Yes: No:

Are there any outstanding liens against you or your company? Yes: No:

If the answer to any of the above is yes, explain fully in space provided below.

FINANCIAL STATEMENT

Every applicant for licensure must furnish this statement. If you are applying as an individual, it must reflect your financial standing. If you will qualify a company of any kind, it must reflect that company's finances. If your assets consist mainly of cash in banks and/or machinery & equipment, you must also submit cash verification from the bank and a listing of machinery & equipment (indicating value of each).

You may submit an accountant's statement in lieu of this form

Statement of financial condition of: _____ as of: _____
Name of individual or entity Date:

ASSETS		LIABILITIES	
Current Assets	Amount	CURRENT LIABILITIES	AMOUNT
Cash in Bank:		Accounts Payable:	
Notes Receivable:		Notes Payable to Bank:	
Accounts Receivable – current:		Other Notes Payable:	
Inventory:		Notes Receivable Discounted:	
		Mortgages & Bonds Payable:	
		Accrued Income Taxes:	
		Wages & Interest:	
		Other Current Liabilities:	
TOTAL CURRENT ASSETS:			
Land:			
		TOTAL CURRENT LIABILITIES:	
		Other Liabilities (due after 1-year)	
Buildings-Net (after depreciation):			
Machinery, Fixtures & Equipment:			
Leasehold Improvements - Net:			
Cash Value Life Insurance:		TOTAL LIABILITIES:	
Stocks & Bonds:			
Prepaid Expenses & Deferred Charges		Capital Stock Surplus (corporation)	
Other Assets (itemize):			
		NET WORTH**:	
TOTAL ASSETS:		Total Liabilities & Net Worth:	

Total Assets Must Equal Total (Liabilities and Net Worth)

The Undersigned Certifies that the information herein is true and correct.

By: _____
Signature of Applicant, Proprietor, Partner or Officer

Title: _____ Date: _____

If Partnership or corporation, give names of partners or corporation officers:

WORK EXPERIENCE

DATES	COMPANY	POSITION

The initial certificate of competency will expire on September 30. The certificate of competency must be renewed bi-annually prior to September 30. The renewal fee for a Specialty Contractor is \$20.00

Any willful falsification of any information contained herein is grounds for revocation of the Certificate of Competency.

Print Name

Date

Signature

**SWORN STATEMENT UNDER SECTION 287.133(3)(a), FLORIDA STATUTES,
ON PUBLIC ENTITY CRIMES**

(To be signed in the presence of a notary public or other officer authorized to administer oaths.)

Before me, the undersigned authority, personally appeared _____, who, being by me first duly sworn, made the following statements:

1. The business address of _____
(name of bidder or contractor)
is _____.
2. My relationship to _____
(name of bidder or contractor)
is _____.
(relationship such as sole proprietor, partner, president, vice president, etc.)
3. I understand that a public entity crime as defined in Section 287.133 of the Florida Statutes includes a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity in Florida or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or such an agency or political subdivision and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
4. I understand that "convicted" or "conviction" is defined by the statute to mean a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
5. I understand that "affiliate" is defined by the statute to mean (1) a predecessor or successor of a person or a corporation convicted of a public entity crime, or (2) an entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime, or (3) those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate, or (4) a person or corporation who knowingly entered into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months.
6. Neither the bidder or contractor nor any officer, director, executive, partner, shareholder, employee, member or agent who is active in the management of the bidder or contractor nor any affiliate of the bidder or contractor has been convicted of a public entity crime subsequent to July 1, 1989.

Signature/Date (undersigned authority)

Sworn to and subscribed before me in the state of _____ and county of _____ on the _____ day of 20_____.

Notary Public

(affix seal)

My commission expires