



**2011-2012 CONTRACTOR REGISTRATION**

Please note that a separate application for registration must be made for each qualifier within any given organization wishing to do business in Palm Beach Gardens. In addition, a separate application and registration must be made for each trade requesting to do business in Palm Beach Gardens, regardless of qualifier, within any given organization.

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_ Suite \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ Suite \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Company Owner Name \_\_\_\_\_

Owner Address (if different) \_\_\_\_\_

Telephone Number \_\_\_\_\_ Cell \_\_\_\_\_

Qualifier Name \_\_\_\_\_ License # \_\_\_\_\_

Telephone Number \_\_\_\_\_ Cell \_\_\_\_\_

I, \_\_\_\_\_, (qualifier) understand that my signature will be required on all applications made to the City and that I will be liable for all work performed under permits issued to me by the City of Palm Beach Gardens. In addition, I understand that the Company, regardless of stated qualifier, may be denied permit issuance or inspections should any of my licenses or insurance certificates expire, or should it be determined by the Building Official, or designee, that renewal or reissuance fees on expired permits are owed by the Company.

\_\_\_\_\_  
Qualifier Signature Date

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_  
(Name of person acknowledging)

(Print, type or stamp Commissioned Name of Notary Public)

Notary \_\_\_\_\_  
(Signature of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_  
Type of Identification \_\_\_\_\_

PLEASE ATTACH  State License OR  State Registration and Palm Beach County Competency

\$20.00 Registration Fee  Liability Insurance  Workers Compensation Insurance (or exemption)

