

**VILLAGE OF PALMETTO BAY
BUILDING DEPARTMENT
9705 E HIBISCUS STREET
PALMETTO BAY, FL 33157
305-259-1250. FAX 305-259-1291**

CONTRACTOR REGISTRATION

Business Name: _____

Business address: _____

Business Mailing Address: _____

Phone: _____ Fax: _____ Cell: _____

City: _____ State: _____ Zip Code: _____

In order for contractors to obtain permit from the Village of Palmetto Bay, they must register with us by submitting the following requirements in a valid and current state:

- | | | |
|----------------------------------|-------|-------|
| ___ 1. state Certification | _____ | _____ |
| ___ 2. State Registration | _____ | _____ |
| ___ 3. Certificate of competency | _____ | _____ |
| ___ 4. Occupational License | _____ | _____ |
| ___ 5. Liability Insurance | _____ | _____ |
| ___ 6. Workers Comp Insurance | _____ | _____ |
| ___ 7. Workers Comp Exempt | _____ | _____ |
| ___ 8. Driver` s license | _____ | _____ |

Qualifier` s Name _____

Qualifier`s Signature _____

Qualifier` s Address _____

Phone _____ Fax _____ Cell _____

***All permits applications require the qualifier` s signature.**