**MONROE COUNTY GROWTH MANAGEMENT BUILDING DEPARTMENT**
Middle Keys/Main Office: 2798 Overseas Highway, Suite 300, Marathon, FL (305) 289-2501
Upper Keys Office: 102050 Overseas Highway, Key Largo, FL (305) 453-8800
11601 CR 905, Key Largo, FL (305) 453-8765
Lower Keys Office: 5503 College Road, Key West, Suite 203, FL (305) 295-3990
**www.monroecounty-fl.gov**

## State Certified Contractor Registration Instructions

A State Certified Contractor wanting to register or update a registration in un-incorporated Monroe County must submit a completed State-Certified Contractor Registration Application with the following:

1. Legible copy of driver's license or some other valid form of government approved identification.

2. Copy of Contractor License; qualifying agent's name must match the name on driver's license and all documenations.

3. The corporation and/or fictitious name you qualify must be registered and in ACTIVE status with the Florida Division of Corporations (www.sunbiz.org). You must provide the document number or registration number for company on application.

4. Copy of current local business tax receipt (f/k/a occupational license) for your discipline from where your permanent business location or branch office is maintained for contractors licensed by DBPR. Otherwise, you must obtain a Monroe County Local Business Tax receipt. ***NOTE: Qualifying Agent's Name, Company Name, and License Number must be noted.***

5. Copy of current-issued Certificate of Insurance from an insurance company authorized to do business in the state for the proper aggregate amount of public liability and property damage insurance for your discipline.

6. Copy of current-issued Certificate of Insurance from an insurance company authorized to do business in the state for workers' compensation insurance and/or a valid executed workers' compensation exemption for your discipline.
**NOTICE:** W/C insurance for all non-exempted officers must be provided.

a) Partners, Officers Exclusion Endorsement Schedule page required if officers are excluded from workers' compensation

b) **Leasing Company:** If using a leasing company, they **shall** supply an employee roster listing ALL employees and date-of-hire with the Certificate of Insurance. Qualifier/officers/members must be covered by insurance or provide valid exemption.

7. The Certificate of Liability Insurance shall be prepared by an insurance agency and must contain the following:
   a. Proper aggregate amount of public liability and property damage for your discipline
   b. Name of Insured **must reflect the exact name** of the business organization qualified by the applicant, if applicable
   c. Licensee's correct license number(s)
   d. **Certificate Holder:** Monroe County Building Department, 2798 Overseas Highway, Suite 300, Marathon, Florida 33050

8. An original Monroe County **Agent Authorization Form** required if anyone other than the licensee will be dropping off and/or picking up a permit. **NOTICE:** The licensee, no exceptions, must sign all Building Permit applications.

9. Registration fee of $50.00 for each new license being registered required; check or money order payable to Monroe County Building Department. **NOTE: No Credit Card Payments at this Time.**

10. Completed application and all supporting materials may be mailed-in or dropped-off at any of our offices; updated registrations (except agent letters) may be e-mailed to mayan-odalys@monroecounty-fl.gov

11. ***Registration may take up to ten (10) business days NOT including the day of submission, so please plan accordingly;* a separate visit will be required to submit your building-permit application.**

12. **YOU WILL NOT BE CONTACTED UPON COMPLETION OF YOUR REGISTRATION**. You should retain this page for your records as you will need it to verify your application is being processed for activation.

Go to our website to search for your company name or qualifier's name at **Egov.monroecounty-fl.gov**, "I Want To, Search, Permits, Contractor Records" webpage **(or click here: http://egov.monroecounty-fl.gov/eGovPlus/entity/login_main.aspx).**

**NOTICE:** INCOMPLETE APPLICATIONS WILL BE RETURNED RESULTING DELAYING REGISTRATION. USE THIS CHECKLIST TO ENSURE YOU HAVE ENCLOSED/ATTACHED ALL THE REQUIRED DOCUMENTATIONS. KEEP THIS INSTRUCTIONS PAGE READILY AVAILABLE TO ASSIST IN LOCATING YOUR RECORD.

If you have any questions regarding the contents of this form or if we may further assist you, please feel free to contact the Licensing Division at (305) 289-2583. Lobby hours are Monday through Friday, 8:30 A.M. to 3:00 P.M., closed on holidays.

| Office Use: Received: | By: | Contractor ID #: | Date Paid: |
|---|---|---|---|
| Receipt #: | By: | Contractor ID # No Longer in Use, If applicable: | |

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## State Certified Contractor Registration Application

**Registration Type:**

**Select Registration Type:**
☐ New Registration
☐ Update Registration
*(No Fee)*

**Section I – License**
Contractor's License Number(s):_____

**Section II – Applicant**
Licensee's Name:_____
**(Name MUST match name on driver's license)**

Home Address:_____

Licensee's Cell Phone Number:_____

Licensee's E-mail:_____
*Provide if communication by e-mail is acceptable for all e-mails corresponding to contractor licensing.*

**Section III – Business**
Qualified Business Name:_____
***(Print Company Name AS it appears on license)***

The corporation and/or fictitious name you qualify must be registered and in ACTIVE status with the Florida Department of State Division of Corporations (www.sunbiz.org). List document or registration number: _____

Business Mailing Address:_____

Business Phone Number:_____Ext:_____ Fax Number:_____

Business E-mail:_____
*Provide if communication by e-mail is acceptable for all e-mails corresponding to contractor licensing.*

**Section IV – Signature**
I swear and affirm that the all of the above is correct, true, and accurate to the best of my knowledge.

Licensee's Signature:_____ Date:_____

STATE OF_____

COUNTY OF_____

Sworn to & subscribed to before me this _____day of _____ 20_____, he / she is personally known to me or has produced _____as identification and who did (did not) take an oath.

_____
**Notary's Signature** **Seal**