



# SANTA ROSA COUNTY DEVELOPMENT SERVICES

6051 Old Bagdad Highway, Suite 202 | Milton, Florida 32583

## CONTRACTOR LICENSE REGISTRATION

- Contractor/ License Holder Name: \_\_\_\_\_
- Business/ Company Name: \_\_\_\_\_
- Mailing Address: \_\_\_\_\_
- |               |             |              |                 |
|---------------|-------------|--------------|-----------------|
| <i>Street</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> |
|---------------|-------------|--------------|-----------------|
- Business Phone: \_\_\_\_\_ Cell/ Mobile Phone: \_\_\_\_\_
- Email for Business/ Permitting: \_\_\_\_\_
- Email for Contractor/ License Holder: \_\_\_\_\_

## REQUIRED DOCUMENTS

**Please ensure your request for Contractor License Registration is accompanied by all the following documents and is returned to the mailing address above or emailed to [WebEmail-ContractorLicenses@santarosa.fl.gov](mailto:WebEmail-ContractorLicenses@santarosa.fl.gov):**

- State of Florida DBPR license certificate - Certified or \*\*Registered.
- Certificate of Liability Insurance (Required Coverage Limits: 300K/OCCURRENCE – 600K/GENERAL AGG-Products Included). Please list the Certificate Holder as follows: **Santa Rosa County**, 6051 Old Bagdad Hwy, Suite 202, Milton, FL 32583.
- Proof of Workers Compensation Coverage (or State of Florida Exemption) with the Certificate Holder listed as stated above. **If insured is out of state, the certificate must indicate that Florida workers are covered under "Description of Operations."**
- Business Tax Receipt (a.k.a. Occupational License); only required if office is within the State of Florida.
- Color Copy of Qualifier's Driver's License
- Hold Harmless Agreement - notarized  
*Form is available under Development Services on Santa Rosa County Website.*
- Authorization to Obtain Permits - notarized  
*Form is available under Development Services on Santa Rosa County Website.*
- \*\*Letter of Reciprocity (for State Registered/ Local License Holders) is required from your original licensing jurisdiction. The letter must include: Name of Testing Company, Test Scores for all tests, Types of Tests taken, Location in which tests were taken, and Dates of Tests taken.
- \*\*A Biennial Competency Card fee payment of \$200 is required for Florida State Registered or locally-licensed contractors. The fee is assessed every odd year and due between August 1 and September 30. No fees are due for State Certified Contractors.

\_\_\_\_\_  
*Signed by Contractor/ License Holder*

\_\_\_\_\_  
*Date Signed*