

VOLUNTARY REGISTRATION FOR STATE-CERTIFIED CONTRACTORS

STATE-CERTIFIED VOLUNTARY REGISTRATION CHECKLIST

- Copy of State License (actual certificate not summary from state website)
- Copy of the Business Tax Receipt (Occupational License) from the County where your office is located. If you are located in Collier County, you must have a Collier County Business Tax Receipt. Call (239) 252-2477 for further information.
- Certificate of Contractor's General Liability Insurance (minimum requirements for your category) showing Collier County Contractor Licensing Board as the Certificate Holder.
- Workmen's' Compensation Certificate of Insurance showing Collier County Contractor Licensing Board as the Certificate Holder and/or a copy of Workers' Comp Exemption filed with the State. **NOTE:** Qualifier(s)/License Holder(s) are required to be listed on the policy as "Included" or "Excluded".
- Fee of **\$45.00 for each license being submitted**. You may pay by check, card, or cash. Make checks payable to: "*Board of Collier County Commissioners*". This is for use of our online portal and permitting system.
- Copy of Driver's License

If you have any questions, please contact Contractor Licensing:

MAIN #: (239) 252-2431

FAX #: (239) 252-2469

VOLUNTARY REGISTRATION FOR STATE-CERTIFIED CONTRACTORS

STATE-CERTIFIED VOLUNTARY REGISTRATION FORM

INSTRUCTIONS: Please complete the below form. Do not leave any blank spaces. The fee of **\$45.00** must accompany this application for use of our online portal and permitting system. The fee is **NOT** refundable after the application has been accepted and recorded. All checks should be made payable to the *“Board of Collier County Commissioners”*.

License Holder: _____
Last Name First Name MI

Home Address: _____
Street City State Zip

E-mail Address: _____

Driver's License # (Last 4 Only) _____ Date of Birth: _____

State License #: _____

Name of Company: _____

D.B.A _____

Mailing Address: _____
Street City State Zip

Phones - Business: _____ Cell: _____ Fax: _____

Physical Address (if different from mailing address):

Street City State Zip

License Holder's Signature

License Holder Printed Name

You can submit this in person, by fax, or email: Contractorslicensing@colliercountyfl.gov.