



Application for License Registration

Please submit the following with your application:

- Liability Insurance with Gilchrist County as Certificate Holder
- Workman's Compensation Insurance or Exemption
- Copy of State Registration
- 3 Letters of Reference
- Copies of any other licenses held in the State of Florida
- \$100.00 Application Fee
- Copies of Block Test Scores

Gilchrist County will do a local background check

Upon Approval

Competency License Fee \$25

Application for License Registration
 Gilchrist County Construction Industry Licensing Board
 209 SE First Street Trenton, FL 32693
 Phone: (352) 463-31 73 Fax: (352) 463-31 89

Application Fee: \$100.00

** Please note that if question does not apply to you list NIA.**

Name: _____
Address: _____
City, State and Zip: _____
Phone: _____
Previous Address: _____
City, State and Zip _____

Statement of all special training experiences that you have had that qualifies you as a competent contractor:

Counties in which you have practiced your trade. Attach copies of current competency license s) or state licensels) in the past 5 years:		
County	Current Date	Date Issued

Name of Liability Insurance Carrier: _____

Workers Compensation Carrier: _____

Have you been bonded within the past 5 years? _____

If so, give name and address of Bonding Carrier: _____

Type of License Registration Requesting: _____

List the names and addresses of (3) or more supply firms that you have made substantial purchases from within the past 5 years, giving the amount of credit, if an , established with

each firm:	
Name	Address
List names and address of the last (5) projects completed by you, giving the year in which completed:	
Name	Year

Have you had any judgments or liens against you?

If yes, List County, state, dates, and details: _____

Do you have labor or material liens against any person or company as a result of your failure to complete a contract? _____. If yes explain: _____

Do you have any criminal convictions? _____, if yes please list county, state, dates and details:

Please list any law suits in which you have been involved either as plaintiff or defendant?

Credit References:

Name	Address	Type of Credit

Number of employees you will have? _____

Have you ever applied for a Gilchrist County License before? Yes No

Have you ever had a license denied or revoked? Yes No If yes, please explain:

I certify that the answers to these application questions are true and correct to the best of my knowledge. I give Gilchrist County Building Department permission to do criminal background investigation and credit check.

I give consent for Gilchrist County to receive any information needed for above information and or investigation.

Signature

Date

Print Name

Notary Signature

Date

Seal: