



Planning & Development Department
LICENSING REGULATION AND ENFORCEMENT
2725 Judge Fran Jamieson Way, Suite A-105, Viera, FL 32940

Phone: (321) 633-2058
Fax: (321) 690-6878
www.brevardcounty.us/licensing

**STATE CERTIFIED CONTRACTOR
PERMITTING INFORMATION FORM**

2012

Name of License Holder (*Print*)

State License Number

Business Name

Home Phone

Business Address

Business Phone

City State Zip

Business Fax

License Holder Signature *****Required***** Date

Business Email

DOCUMENTATION REQUIRED FOR PERMITTING - Business name must match on all documents exactly as shown on license or request will not be processed:

- \$25.00 Repository Fee** (payable upon initial submittal & each year of state certified license renewal)
- Copy of State Certified License**
- Copy of Workers' Compensation Exemption Card** (if applicable)
- Copy of current Business Tax Receipt** (formerly known as Occupational License)

- **Certificate of Insurance for General Liability**
- **Certificate of Insurance for Workers' Compensation**

****Certificates of Insurances must have your proper company name as the insured, must list phone & fax number of insurance agent/producer, must be received from the insurance company and list our department as the certificate holder as shown:**

**Brevard County Licensing Regulation & Enforcement
2725 Judge Fran Jamieson Way, Suite A-105
Viera, FL 32940**

Payment Type:

Cash Check (payable to Brevard County BOCC) Credit Card-Contact Name: _____

Keep in mind that we do accept faxed forms and credit card payments (\$2 surcharge applies). If you will be paying the repository fee with a credit card, make a notation on the fax and someone will call you to arrange payment.

Please allow 5 – 10 business days for processing.

Staff Only: Payment # _____ Payment Date _____ Compl. Date _____ Entered by _____

Record entry: New _____ Update _____ 2010REPOFORM-REVISED.doc 04/20/2010