



PINELLAS COUNTY CONSTRUCTION LICENSING BOARD

ALL FEES ARE NON-REFUNDABLE

TO: APPLICANTS FOR CONTRACTOR'S RECIPROCITY

REF: CHAPTER 75-489, LAWS OF FLORIDA

The Pinellas County Construction Licensing Board has a policy of reciprocity with other Florida jurisdictions. The conditions for reciprocity of licensing are:

1. Applicant completes required PCCLB applications;
2. Applicant pays original licensing fee required of all PCCLB-licensed contractors (\$125);
3. Applicant has passed a Block, Thomson Prometric, Prometric or Experior proctored examination in the particular Construction Field;
4. Local licensing authority provides an original letter with:
 - a. Applicant's name
 - b. Date of proctored examination by Block and Associates
 - c. Score attained by applicant.
 - d. Statement of good standing with licensing jurisdiction;
5. Local jurisdiction agrees to reciprocate with the PCCLB-licensed contractors;
6. PCCLB approves applicant for licensure.

Each applicant must complete the attached application forms with supporting documents and file them with the Board. The Committees meet the first Tuesday and Wednesday of each month. The next committee meeting is _____ . Your application should be submitted not later than _____ .

If an applicant for an original certificate does not provide a complete application with all required supplementary information within one year from the date of filing the application, the fee paid shall be credited to the PCCLB as an earned fee. A new application for a certificate shall be accompanied by another application fee.

ALL FEES ARE NONREFUNDABLE

Pinellas County Construction Licensing Board

12600 BELCHER ROAD, SUITE 102
LARGO, FLORIDA 33773
Telephone (727) 536-4720

RECIPROCITY APPLICATION FORM

Cert. No. _____

Receipt. No. _____

Date: _____

DO NOT FILL IN ABOVE DOUBLE LINE

PLEASE READ CAREFULLY

Type or Print in ink. Answer all questions.

1. I am applying for license as a:

- | | |
|---|---|
| <input type="checkbox"/> Painting Specialty Contractor | <input type="checkbox"/> Communication Systems Specialty Contractor |
| <input type="checkbox"/> General Contractor | <input type="checkbox"/> Mechanical Contractor |
| <input type="checkbox"/> Building Contractor | <input type="checkbox"/> Class A Air Conditioning Contractor |
| <input type="checkbox"/> Residential Contractor | <input type="checkbox"/> Class B Air Conditioning Contractor |
| <input type="checkbox"/> Electrical Contractor | <input type="checkbox"/> Sheet Metal Contractor |
| <input type="checkbox"/> Plumbing Contractor | <input type="checkbox"/> Commercial Pool Contractor |
| <input type="checkbox"/> Roofing Contractor | <input type="checkbox"/> Residential Pool Contractor |
| <input type="checkbox"/> Aluminum Contractor | <input type="checkbox"/> Swimming Pool Servicing Contractor |
| <input type="checkbox"/> Veneer Specialty Contractor | <input type="checkbox"/> Underground Utility Contractor |
| <input type="checkbox"/> Low Voltage Specialty Contractor | |
| <input type="checkbox"/> Other Specialty: _____ | |

2. Have you previously applied to this Board for licensure as a contractor or journeyman? If so, when?

3. Name of Individual to be Certified:

4. Residence Address: _____ City _____ Zip _____

5. Date of Birth: _____ Place of Birth: _____

6. Sex: Male Female 7. Social Security Number: _____

(The PCCLB collects your social security number for the following purposes: classification of accounts; identification and verification; credit worthiness; billing and payments; data collection, reconciliation, tracking, benefit processing, and tax reporting. Social security numbers are also used as a unique numeric identifier and may be used for research purposes).

8. Telephone: Home _____ Business: _____ Fax: _____

E-mail: _____

9. Business Name: _____

10. EDUCATION:

Institution	Location	Years Attended	Date of Graduation
High School _____	_____	From: 19 ____ To: 19 ____	_____
College _____	_____	From: 19 ____ To: 19 ____	_____
Other _____	_____	From: 19 ____ To: 19 ____	_____

11. Have you previously been in business as any type of licensed contractor?

How long? _____ Type of Contractor _____

Where? _____

12. History of employment as an employee or contractor in the profession for which you desire certification:
use last ten years only.

13.	DATE: MONTH/YEAR		YOUR POSITION TITLE, NAME AND ADDRESS OF EMPLOYER, SHORT DESCRIPTION OF YOUR DUTIES AND DEGREE OF RESPONSIBILITY.	NAME AND ADDRESS OF SUPERVISOR OR PERSON FAMILIAR WITH YOUR DUTIES.
	FROM	TO		

What are the names and addresses of all businesses in which the applicant has owned, operated or managed during the past five years?

14. A personal credit report must be submitted to the Board directly from the credit reporting agency and must include an official public records check for Pinellas County. Applications will not be accepted unless the credit report has been received or a receipt for same is included with the application.
15. **Three original character letters** must be submitted from reputable business or professional persons (*not former employers or relatives of applicant*) of Pinellas County or the county of applicant's last business location.
16. If the answer to any of the following questions is "yes", explain fully on a separate sheet of paper.

	<u>YES</u>	<u>NO</u>
a. Have you been convicted of a misdemeanor or felony, or are you presently under a charge of committing a misdemeanor or a felony?	_____	_____
b. Have you ever been refused a contractor's or other professional license, or had such a license suspended or revoked?	_____	_____
c. Have you during the past five years had more than three business complaints filed against you or a business you owned or managed, through a trade association, a Better Business Bureau, or other non-governmental agency?	_____	_____
d. Has any federal, state, county, or other governmental agency filed any business, civil, or criminal complaints against you during the past five years?	_____	_____
e. Have you ever failed to complete a construction contract?	_____	_____
f. If you have ever failed to complete a construction contract, are there any outstanding labor or material liens against any person or company as a result?	_____	_____
g. Are there any outstanding labor or material liens against you or your company?	_____	_____
h. Are you now doing business, or have you ever done business, under a fictitious name: Attach proof of compliance with the Florida Fictitious Name Act.	_____	_____

17. I hereby apply for a competency license as a _____ Contractor and enclose the fee in amount of \$125.00. I have read the application and the accompanying instruction sheet and have answered all questions truly and honestly. I understand that my certificate can be suspended or revoked for good cause shown.

Applicant Signature

Date

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____ 20__ by

Print (Name of person taking acknowledgment)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ **OR** Produced Identification

Type of Identification Produced _____

VERIFICATION OF CONSTRUCTION EXPERIENCE

_____ 20 _____

PINELLAS COUNTY CONSTRUCTION LICENSING BOARD
12600 BELCHER ROAD, SUITE 102
LARGO, FLORIDA 33773

_____ IS/WAS EMPLOYED BY _____
_____ LOCATED AT _____

FROM _____ TO _____

(Tell in your own words what you know of applicant's experience. Describe the type of work performed and the position as apprentice, helper, journeyman, foreman, supervisory employee, or contractor. Describe the kind of buildings, structures, or projects worked on. Give any other details that might aid in evaluating relevant experience.)

I AM THE QUALIFIER FOR THE ABOVE CONSTRUCTION FIRM, AND HOLD CURRENT CERTIFICATE OF COMPETENCY

NO. _____ FROM _____

AS A _____ CONTRACTOR. I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signed _____

Print Name: _____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this ___ day of _____ 20 ____, by

_____ print (name of person taking acknowledgment)

_____ (Signature of Notary Public - State of Florida)

_____ (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ____ OR Produced Identification

Type of Identification produced _____

(This form may be duplicated. Verification forms must be furnished to substantiate the minimum experience required in the category for which application is made).

(If self-employed, notarized letters from Building Officials, licensing agencies, and/or contractors you performed work for, will be accepted).

To Persons Requested to Certify to Applicant's Experience:

The applicant named on the reverse side is required to prove his right to take a contractor's examination by furnishing these certificates in support of his/her experience shown in his/her application. Enough certificates are required to prove such experience to the Board. The applicant must have had:

Not less than four (4) years experience at the journeyman level preceding the filing of an application, and a total of eight (8) years full-time employment in the plumbing trade.

- PLUMBING

Not less than three (3) years experience at the journeyman level preceding the filing of an application, and a total of six (6) years full-time employment in the electrical trade.

- ELECTRICAL

Not less than four (4) years experience at the journeyman level preceding the filing of an application, and a total of eight (8) years full-time employment in the mechanical or air conditioning trade.

- MECHANICAL

- AIR CONDITIONING

Not less than three (3) years experience at the journeyman level preceding the filing of an application, and a total of six (6) years full-time employment in the sheet metal trade.

- SHEET METAL

Not less than four (4) years experience as a foreman or field supervisory employee preceding the filing of an application.

- ROOFING
- MARINE SPECIALTY
- NATURAL GAS SPECIALTY
- GLASS & GLAZING SPECIALTY
- PRESTRESSED PRECAST CONCRETE SPECIALTY
- FINISH CARPENTRY
- PAINTING SPECIALTY
- STRUCTURAL MASONRY SPECIALTY
- CARPENTRY SPECIALTY
- PAVING SPECIALTY
- REINFORCING STEEL SPECIALTY
- POOLS & POOLS SPECIALTIES
- UNDERGROUND UTILITY
- STRUCTURAL STEEL SPECIALTY
- PILE DRIVING SPECIALTY
- ELECTRICAL SIGN SPECIALTY
- CABINET
- SPECIALTY STRUCTURE

Not less than four (4) years experience at the supervisory level in residential construction preceding the filing of an application.

- RESIDENTIAL

Not less than four (4) years experience at the supervisory level, one year of which is in building construction. (3 stories; multi-family or non-residential)

- BUILDING

Not less than four (4) years experience at the supervisory level, one year of which is in high-rise construction. (For the purposes of licensure, high-rise is considered buildings over three stories high.)

- GENERAL

Not less than three (3) years experience as a foreman or supervisory employee preceding the filing of an application,

- LOW VOLTAGE SPECIALTY
- TILE & MARBLE SPECIALTY
- GYPSUM DRYWALL SPECIALTY
- PLASTER & STUCCO SPECIALTY

Not less than one (1) year experience as a foreman or supervisory employee preceding the filing of an application.

- VENEER SPECIALTY
- FLATWORK MASONRY SPECIALTY
- SHUTTER/OPENING PROTECTIVES SPECIALTY
- GARAGE DOOR SPECIALTY
- SWIMMING POOL SVC & MAINT.
- COMMUNICATION SYSTEMS SPECIALTY
- DEMOLITION SPECIALTY
- SIGN SPECIALTY, NON-ELECTRICAL
- IRRIGATION SPECIALTY
- FENCE ERECTION SPECIALTY

THIS FORM MUST BE NOTARIZED.

DO NOT MAIL THIS FORM TO THE PINELLAS COUNTY CONSTRUCTION LICENSING BOARD.

RETURN IT TO THE APPLICANT IN ORDER THAT HE/SHE MAY ATTACH IT TO HIS/HER APPLICATION.

Your cooperation is earnestly solicited so that the PCCLB can determine whether an applicant has had the experience necessary to become a capable and qualified contractor.

DESCRIPTION OF CONTRACTOR CLASSIFICATIONS

1. GENERAL CONTRACTOR

Unlimited building certificate; residential or commercial building, any size or height.

2. BUILDING CONTRACTOR

limited to commercial and single/multiple residential, not to exceed three (3) stories; also remodeling or repair of any size building if no structural changes are made.

3. RESIDENTIAL CONTRACTOR

Limited to construction, remodeling, or repair of one, two, or three family residences not more than two stories in height.

4. ELECTRICAL CONTRACTOR

Unlimited electrical work, all types.

5. PLUMBING CONTRACTOR

Unlimited plumbing work, all types.

6. MECHANICAL CONTRACTOR

unlimited mechanical, air conditioning, boilers, pressure vessels, lift station equipment, pressure and process piping, pneumatic control piping, gasoline tanks/pumps, chemical and fuel lines and related work.

7. CLASS "A" AIR CONDITIONING CONTRACTOR

Unlimited air conditioning, refrigeration, heating, boiler and unfired pressure vessel systems, piping, insulation of pipes, pressure and process piping, pneumatic control piping and related work.

8. CLASS "B" AIR CONDITIONING CONTRACTOR

Limited to 25 tons cooling and 500,000 BTU heating - in air-conditioning, refrigeration, process and pipe insulation vessels and duct work and related.

9. SHEET METAL CONTRACTOR

Unlimited services in manufacturing and installation - ferrous and nonferrous metal U. S. No. 10 gauge or lighter; air handling systems, including setting of air handling equipment and including balancing of air handling systems.

10. ROOFING CONTRACTOR

Services in installation, maintenance, repair, or design of all kinds of roofing and waterproofing.

11. SPECIALTY STRUCTURE CONTRACTOR

Services in the aluminum construction trade.

12. VENEER SPECIALTY CONTRACTOR

Limited to siding, soffit, fascia and gutter work, aluminum, metal and vinyl.

13. COMMERCIAL SWIMMING POOL/SPA CONTRACTOR

Any pool or spa, public or private. Does not include connection to public water or sewer systems.

14. RESIDENTIAL POOL/SPA CONTRACTOR

Any residential pool or spa, intended for use by not more than three families and guests.

15. SWIMMING POOL/SPA SERVICING CONTRACTOR

Service, repair, replastering, heater installation of any pool or spa.

DESCRIPTION OF CONTRACTOR CLASSIFICATIONS (Cont'd.)

16. UNDERGROUND UTILITY CONTRACTOR

Main sanitary sewer collection system, main water distribution systems, storm sewer collection systems of \$5,000 or more in contract value.

17. LOW VOLTAGE SPECIALTY CONTRACTOR

Telecommunications, HVAC Controls, community antenna television and radio distribution systems, signaling systems other than burglar and fire alarms.
(75 v or less)

18. COMMUNICATION SYSTEM SPECIALTY CONTRACTOR

Communication systems including computers, sound systems, antennas, satellite dishes, telephone customer premises equipment or premises wiring operating at 75 volts or less.

19. PAINTING SPECIALTY CONTRACTOR

Painting, paperhanging, sandblasting, caulking and waterproofing (excluding waterproofing of roofs).

20. MARINE SPECIALTY CONTRACTOR

Seawalls, docks, piers, wharves, bulkheads, revetments, groins, and other marine structures. Includes pile driving.

21. STRUCTURAL MASONRY SPECIALTY CONTRACTOR

Batching and mixing of aggregates, cement and water; placing and erection of steel; laying clog and brick; fireplaces and chimneys; forms and framing; pouring, placing, and finishing concrete.

22. FLATWORK MASONRY SPECIALTY CONTRACTOR

Limited to forming, placing, and finishing of nonstructural concrete on grade.

23. GYPSUM DRYWALL SPECIALTY CONTRACTOR

Installation of all metal accessories; prefabricated ceiling materials; surface preparation and finishing. Does not include plastering, block, or wood partitions.

24. NATURAL GAS SPECIALTY CONTRACTOR

Gas piping, appliances, mains, lines, laterals, tanks and appurtenances.

25. CARPENTRY SPECIALTY CONTRACTOR

Rough framing, structural and non-structural, trusses, and sheathing.

26. TILE AND MARBLE SPECIALTY CONTRACTOR

Base and hard tile.marble both residential and commercial.

27. IRRIGATION SYSTEMS SPECIALTY CONTRACTOR

Piping and sprinkler heads including connection to water pumps (non-potable).

28. STRUCTURAL STEEL SPECIALTY CONTRACTOR

Erection and field fabrication including related riveting, welding, and rigging.

29. SHUTTER/OPENING PROTECTIVES SPECIALTY CONTRACTOR

Shutters and opening protectives.

30. DEMOLITION SPECIALTY CONTRACTOR

Demolish/remove structures and foundations.

31. PLASTER, STUCCO AND LATH SPECIALTY CONTRACTOR

Coat interior and exterior surfaces with mixture of sand and portland cement or like mixtures.

32. FENCE ERECTION SPECIALTY CONTRACTOR

Construct, install, maintain or repair fencing.

OVER

33. GLASS AND GLAZING SPECIALTY CONTRACTOR

All makes and kinds of glass and glasswork, frames, panels, mirrors, tub and shower enclosures.

34. PAVING SPECIALTY CONTRACTOR

Asphalt roadways, parking lots, sidewalks, curbs, gutters, airport runways and aprons.).

35. PILE DRIVING SPECIALTY CONTRACTOR

Pilings; foundations including excavating, forming and placing of reinforcing steel and concrete.

36. PRESTRESSED PRECAST CONCRETE SPECIALTY CONTRACTOR

Structural precast concrete units including welding and rigging.

37. REINFORCING STEEL SPECIALTY CONTRACTOR

Fabricate, place and tie steel reinforcing for concrete buildings and structures.

38. ELECTRICAL SIGN SPECIALTY CONTRACTOR

Erect electrical signs: no work beyond the last disconnecting means or terminal point, No branch circuit wiring.

39. SIGN SPECIALTY CONTRACTOR, NON-ELECTRICAL

Install, repair, alter non-electrical signs.

40. FINISH CARPENTRY CONTRACTOR

Paneling, interior and exterior trim, cabinets, bookshelves, wood flooring, stair treads & risers, handrails, exterior windows and doors. Allows non-structural modifications but not the work of another trade except as is allowed by cabinet contractors.

41. CABINET CONTRACTOR

Onsite fabrication, assembling, handling, erection, installation, dismantling, adjustment, repair and servicing of cabinets, countertops, bookshelves, and shelving involving wood, light gauge steel, and allied construction materials. Requires electrical, plumbing, mechanical, tile, gas etc. to be done by licensed contractors in their appropriate trade.

42. GARAGE DOOR SPECIALTY CONTRACTOR

Installation and maintenance of garage doors.

43. SWIMMING POOL LAYOUT SPECIALTY CONTRACTOR

Limited to the layout, shaping, steel installation, and rough piping of pools, spas, and hot tub shells.

44. SWIMMING POOL STRUCTURAL SPECIALTY CONTRACTOR

Limited to the shaping and shooting of gunite, shotcrete, concrete, or similar product mix used in the construction of swimming pools and spas. Also includes the installation of fiberglass shells and vinyl liners.

45. SWIMMING POOL EXCAVATION SPECIALTY CONTRACTOR

Limited to the excavation and earthmoving required for the installation of pools, spas, and hot tub shells.

46. SWIMMING POOL TRIM SPECIALTY CONTRACTOR

Limited to the installation of the tile and coping for pools, spas, and hot tubs shells. Decorative or interactive water displays or areas that use recirculated water, including waterfalls and spray nozzles, are also included in this rule within this scope of work.

47. SWIMMING POOL DECKING SPECIALTY CONTRACTOR

Limited to the construction and installation of concrete flatwork, pavers and bricks, retaining walls, and footings associated with the construction of pools, spas, and hot tub shells.

48. SWIMMING POOL PIPING SPECIALTY CONTRACTOR

Limited to the installation of piping or the installation of circulating, filtering, disinfecting, controlling, or monitoring equipment and devices used in the construction of pools, spas, hot tubs, and decorative or interactive water displays or areas.

49. SWIMMING POOL FINISHES SPECIALTY CONTRACTOR

Limited to the coating or plastering of the interior surfaces of pools, spas, or hot tub shells.



The Committees meet the first Tuesday and Wednesday of each month.

The next committee meeting is

Your application should be submitted not later than _____

TO: APPLICANTS FOR CHANGE OF STATUS

IF YOU PLAN TO QUALIFY AS A COMPANY OR CORPORATION, THE ATTACHED CHANGE OF STATUS APPLICATION MUST BE COMPLETED, NOTARIZED AND SUBMITTED. IT MUST INCLUDE THE FOLLOWING:

CORPORATION OR LLC

- a. Copy of certificate of incorporation or letter of acknowledgement from Florida Secretary of State. Item 11 (3)
- b. List of stockholders holding 10% or more of stock, with the names, addresses, and percentages held (other than a public corporation).
- c. List of all officers and directors of the corporation, including names, addresses and titles.
- d. Acceptance and Appointment of qualifier (Attachment B) to be completed, signed and notarized.

(A corporation would not require a fictitious name registration unless it is a corporation doing business in another company name e. g. Universal Plumbing, Inc. d/b/a Discount Plumbing Services).

COMPANY

If you plan to qualify a company or business entity in any name other than your own, you must attach a fictitious name registration.

- e. g. Robert Jones is qualifying Jones Plumbing Co.
(This would be a fictitious name).
- e. g. Robert Jones is qualifying Robert Jones Plumbing Co.
(This would not be a fictitious name).

ALL BUSINESS ENTITIES

You may be required to meet personally with the examining committee. **All applicants must answer the following questions on a separate sheet of paper.** Applicants seeking to allow a business to operate by virtue of their competency licenses must demonstrate the ability to actively control the construction-related activities of all businesses so qualified.

- 1. Why are you seeking to qualify this business?
- 2. Have you read and do you understand the requirements of Chapter 75-489, Laws of Florida, and particularly Section 24?
- 3. What is your job title in the business?
- 4. What is your supervisory responsibility?
- 5. What is your ownership interest?
- 6. If you do not own the firm, are you paid a salary or wage as an employee? If not, how are you compensated?
- 7. Do you have the authority to hire and fire employees and sub-contractors?
- 8. Do you have ready access to the firm's financial records?
- 9. Do you have access to or authority to approve all contracts written?
- 10. Do you have authority to order materials for construction work?
- 11. How many hours per week do you anticipate working with the business?
- 12. If you qualify more than one, are the two firms related? Do they share a common facility or personnel?

CREDIT REPORT

Credit reports on both the business and the qualifier must be submitted directly from the credit reporting agency to the Board, and must include a public records check for Pinellas County. Applications will not be accepted unless the credit reports have been received or a receipt proving they have been ordered is included with the application.



NOTE: Please type or print in ink

Your License No. _____

CHANGE OF STATUS APPLICATION

1. _____ 2. Social Security No. _____
(Last) (Full Name of Individual) (First) (Middle)

(The PCCLB collects your social security number for the following purposes: classification of accounts; identification and verification; credit worthiness; billing and payments; data collection, reconciliation, tracking, benefit processing, and tax reporting. Social security numbers are also used as a unique numeric identifier and may be used for research purposes).

3. _____
Individual's Address (Street & Number) City State County Zip Code

4. Telephone _____
Area Code Date of Birth

5. _____
FULL NAME OF BUSINESS WHICH IS NO LONGER QUALIFIED Business Phone Area Code

6. _____
Business Address (Street & number) City State County Zip Code

7. _____
FULL NAME OF BUSINESS WHICH IS TO BE QUALIFIED Business Phone Area Code

8. _____
Business Address (Street & Number) City State County Zip Code

9. License No. of any CURRENT OR PREVIOUS Contractor's Registration or Certification held by applicant.

License No. License No. License No. License No.

10. INDICATE NATURE OF REQUEST:

- To qualify an additional company or corporation
- Change of company or corporation
- Change company to individual
- Qualify one company or corporation
- Active license to inactive
- Inactive license to active
- Reinstatement (Varies by Circumstances)

11. BEFORE YOU MAIL YOUR APPLICATION, PLEASE CHECK THE FOLLOWING:

- 1. Return current wallet license.
- 2. **ATTACHMENT A.** Required Information Concerning Business Organizations. Are signatures in the correct place? If fictitious name is issued, is a copy of your compliance attached to this form?
If Company is not incorporated, then Proof of Compliance with Fictitious Name Law may be required. (See Fictitious Name Law)
- 3. **ATTACHMENT A.** Notice Regarding Corporations. Is copy of certificate of incorporation or LETTER OF ACKNOWLEDGEMENT from Florida's Sec. of State attached? Enclose a list of stock holders holding over 10% of stock (other than public corporation).

12. FICTITIOUS NAME LAW 865.09 STATUTE IN PART:

It shall be unlawful for any person or persons to engage in business under a fictitious name unless said fictitious name shall be registered with the Division of Corporations, Florida Department of State. Said registration may not be made until the person or persons desiring to engage in business under a fictitious name shall have advertised his or their intention to register said fictitious name at least once in a newspaper as defined by law in the county where the principle place of business is located.

13. If qualifying a corporation, a list of all major stockholders, officers and directors is required on a separate sheet of paper (all stock- holders holding 10% or more of the outstanding stock).

This Original Application must be returned.

14. FINANCIAL RESPONSIBILITY

- (a) Has any bonding or surety company ever completed or made a financial settlement upon any construction contract of work undertaken by you or any organization in which you were the qualifier or principal? Yes No
If so, attach a detailed statement including the name and address of the bonding or surety company, the names and locations of jobs which were completed by the bonding or surety company or on which settlements were made, the amounts of the settlements and to whom paid.
- (b) Are there now any liens, suits, or judgments of record or pending as a result of your construction operations or those of this firm?
Yes No
- (c) Are there now any liens of record by the U.S. Internal Revenue Service or the State of Florida Corporate Tax Division against you or this firm? Yes No
If so, attach a detailed statement including lien claimants and the amounts claimed.
- (d) Have you ever been convicted of any offense in this state, or elsewhere, other than traffic violations? Yes No
If so, attach a detailed statement including the crime for which there was a conviction, the approximate date, the location, the sentence served, if any, and parole, if any.
- (e) Has a credit report been provided or ordered for both you and the business organization? Yes No

AFFIDAVIT

The undersigned hereby makes application for certification under the provisions of Chapter 75-489, Laws of Florida, and vouches for the truth and accuracy of all statements and answers herein contained.

The undersigned hereby certifies that he is legally qualified to act on behalf of the business organizations sought to be certified in all matters connected with its contracting business and that he has full authority to supervise construction undertaken by himself or such business or organization and that he will continue during this certification to be able to so bind said business organization. If, at any time during this certification, he ceases to be able to so bind or act for this business organization he will immediately notify the Board in writing. The qualifier/license holder understands that in all contracting matters, he/she will be held strictly accountable for any and all activities involving his/her license.

Any willful falsification of any information contained on this application or attached forms are grounds for disqualification.

STATE OF FLORIDA

COUNTY _____

The foregoing instrument was acknowledged before me

this ____ day of _____ 20 ____ by

(name of person taking acknowledgment)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known __ **OR** Produced Identification

Type of Identification Produced _____

- If a proprietorship, the Applicant shall sign.
- If a Corporation, the Applicant, the President, the Vice-President, and Secretary shall sign.
- If a Partnership, the applicant and each partner shall sign.
- If a joint venture or other entity, signatures of those individuals who customarily bind that entity are required.

Applicant's Signature Applicant Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

THIS FORM MUST BE NOTARIZED

This form shall be completed by any person applying to conduct business in other than his individual capacity. If you are applying as an individual, you need not complete this form. **Answer all questions.**

Chapter 75-489, Statute of Florida provides:

Section 18 Business Organizations; qualifying agents.

(1) If an individual proposes to engage in contracting in his own name, registration or certification may be issued only to that individual.

(2) If the applicant proposes to engage in contracting as a partnership, corporation, business trust, or other legal entity, the applicant shall apply through a qualifying agent; the application shall state the name of the partnership and of its partners, the name of the corporation and of its officers and directors, the name of the business trust and its trustees, or the name of such other legal entity and its members; and the applicant shall furnish evidence of statutory compliance if a fictitious name is used. Such application shall also show that the qualifying agent is legally qualified to act for the business organization in all matters connected with its contracting business and that he has authority to supervise construction undertaken by such business organization. The registration or certification, when issued upon application of a business organization, shall be in the name of the qualifying agent and the name of the business organization shall be noted thereon.

(3)(a) The qualifying agent shall be certified or registered under this act in order for the business organization to be certified or registered in the category of the business conducted for which the qualifying agent is certified or registered. If any qualifying agent ceases to be affiliated with such business organization, he/she shall so inform the Board. In addition, if such qualifying agent is the only certified or registered individual affiliated with the business organization, the business organization shall notify the Board of the termination of the qualifying agent and shall have a minimum of 60 days from the termination of the qualifying agent's affiliation with the business organization in which to employ another qualifying agent. The business organization may not engage in contracting until a qualifying agent is employed.

(b) The qualifying agent shall inform the Board in writing when he/she proposes to engage in contracting in his/her name or in affiliation with another business organization, and he/she or such new business organization shall supply the same information to the Board as required of applicants under this act

1. BUSINESS ORGANIZATION

Exact Name of
Business Organization,

Organization is a (*check one*)

Partnership Corporation Proprietorship Other (*specify*):

Federal Employer
Identification (FEIN) No.:

If none, attach explanation
or proof of application.

2. STATEMENT OF AUTHORITY TO ACT FOR THE BUSINESS ORGANIZATION

Any person applying to be issued a certificate or registration to engage in contacting in other than his individual capacity, or any registrant or certificate holder applying to qualify a partnership, corporation, business trust or other legal business entity shall furnish the Board a notarized statement that he is legally qualified to act for the business organization in all matters connected with its contracting business and that he has authority to supervise construction undertaken by such business organization. **(See Attachment B)**

3. Is the applicant who is to qualify the business organization in 1 presently qualifying or attempting to qualify another contracting business organization? If yes, give details: Yes No

4. Will there be any ownership by the applicant of the business organization named in 1 above? If yes, give details: Yes No

5. CORPORATE INFORMATION (If you are not applying to conduct business as a corporation, skip this section and go to Section 6 below)

Upon the advice of the Attorney General, it is the policy of this Board not to issue a contractor's certification to a corporation unless it is qualified to do business in this State either as a domestic or a foreign corporation. To be qualified to do business in this State, a domestic or foreign corporation must be registered and in good standing with the Secretary of State of the State of Florida.

Name of Corporation or LLC

Corporate I. D. No. or Charter No.

State of Incorporation Date registered with the Florida Secretary of State

YOU MUST ATTACH BOTH

- (A) A copy of certificate of incorporation in the State of Florida or a letter of acknowledgement of authority issued by the Secretary of State of the state of Florida.
- (B) A list of all persons holding 10% or more of the outstanding stock of the corporation.

6. FICTITIOUS NAME STATUTE

If the business organization is or will be operating under a fictitious name as defined in Chapter 865.09 F.S. (See Reverse), you must attach evidence of proof of your compliance.

7. AFFIDAVIT

The undersigned hereby certifies that the information supplied herein and on all attachments is true and correct.

STATE OF FLORIDA
COUNTY OF

The foregoing instrument was acknowledged before me
this ____ day of _____ 20 ____ by

(name of person taking acknowledgment)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification

Type of Identification Produced _____

- If a Proprietorship, the Applicant shall sign.
- If a Corporation, the Applicant, the President, the Vice-President, and secretary shall sign
- If a Partnership, the applicant and each partner shall sign.
- If a joint venture or other entity, signatures of those individuals who customarily bind that entity are required.

Applicant's Signature Applicant Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

Signature of Partner or Corporate Officer Title Address (P. O. Box Not Acceptable)

THIS FORM MUST BE NOTARIZED

At a meeting of _____, held on the _____ day of _____

(Name of Business Organization)

_____ 20 _____, _____ was legally appointed as the

(Name of Qualifier)

qualifier to act for the business organization in matters connected with its contracting business, and given authority to supervise construction undertaken by the business organization.

SIGNATURE OF OFFICER/PARTNER/TRUSTEE

SIGNATURE OF OFFICER/PARTNER/TRUSTEE

TITLE OF OFFICER

TITLE OF OFFICER

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me
this _____ day of _____ 20 ____ by

(name of person taking acknowledgment)

(Signature of notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ___ **OR** Produced Identification

Type of Identification Produced _____

ACCEPTANCE OF APPOINTMENT

I, _____, hereby accept appointment as the contractor of record for the _____

(Business Organization)

and assume the responsibilities for the business organization and its employees as outlined in Chapter 489, Florida Statute, and Chapter 75-489, Laws of Florida. I represent that I will actively supervise all work contracted and/or permitted by authority of my competency card or registration and will otherwise take an active role in the operations of this business. I will promptly notify the Pinellas County Construction Licensing Board if I end my affiliation with this business organization.

STATE OF FLORIDA
COUNTY OF _____

Signature of Contractor

The foregoing instrument was acknowledged before
me this _____ day of _____ 20 ____
by

Certification or Registration Number

(name of person taking acknowledgment)

(Signature of notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ___ **OR** Produced Identification

Type of Identification Produced _____

CERTIFICATE OF INSURANCE REQUIRED

All active contractors must furnish and maintain with the Pinellas County Construction Licensing Board a certificate of insurance for general liability insurance. This certificate must be in the minimum amount of \$300,000 per occurrence commercial general liability insurance. Additionally, the certificate must show proof of workers' compensation insurance as required by law. The certificate must show our name and address as the certificate holder:

**Pinellas County Construction Licensing Board
12600 Belcher Road, Suite 102
Largo, FL 33773**

The PCCLB is not additionally insured, only certificate holder

You will be required to have a valid certificate on file with the Board in order to maintain your license and to renew your active certification annually. This applies to all contractors. All contractors must show proof of workers' compensation coverage. Any contractor subject to licensure under the authority of the PCCLB, when working on projects that coverage becomes required by the Longshore and Harbor Workers' Compensation Act (LSHWCA), 33 U.S.C. 901, et, seq., must retain and maintain proper coverage under the LSHWCA. Failure to do so shall constitute per se misconduct in the practice of contracting.

The certificate of insurance must provide a policy number issued by the insuring company,

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE, THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER AND MAIL TO:

**PINELLAS COUNTY CONSTRUCTION LICENSING BOARD
12600 BELCHER ROAD, SUITE 102
LARGO, FL 33773**

Both the licensee in his/her name and the name of the firm, if applicable, must be named in the certificate. If you are conducting business as a company, corporation or, LLC, the certificate should be worded:

(YOUR COMPANY, CORPORATION OR LLC) AND YOUR NAME

**Example: XYZ CORPORATION AND JOHN DOE Example: XYZ,
LLC AND JOHN DOE**

If you are conducting business in your name only, this would be the only name listed on the insurance certificate:

Example: JOHN DOE

CHAPTER 75-489, LAWS OF FLORIDA, AS AMENDED

Section 24. REVOCATION OR SUSPENSION OF CERTIFICATE OR REGISTRATION.

(1) On its own motion or the verified written complaint of any person, the board may investigate the action of any contractor certified or registered under this part and hold hearings pursuant to law. When any complaint involves a contractor certified or registered under this part for acts or omissions occurring in any area of the county that has a local board, the board shall forward the complaint to the local board where the alleged violation occurred for its action. Where no local board exists, or when such local board waives its jurisdiction, the board shall take jurisdiction. The board may take appropriate disciplinary action if the contractor⁴ is found to be guilty of or has committed any one of the acts or omissions constituting cause for disciplinary action set out herein or adopted as rules or regulations by the board.

(2) The following acts constitute cause for disciplinary action:

(a) Obtaining a certificate or registration by fraud or misrepresentation

(b) Being convicted or found guilty, regardless of adjudication, of a crime in any jurisdiction which directly relates to the practice of contracting or the ability to practice contracting;

(c) Violation of chapter 455, Florida Statutes.

(d) Willfully or deliberately disregarding and violating the applicable building codes or laws of the state, this board, or of any municipality or county of this state;

(e) Performing any act which assists a person or entity in engaging in the prohibited uncertified and unregistered practice of contracting, if the certificate holder or registrant knows or has reasonable grounds to know that the person or entity was uncertified and unregistered;

(f) Knowingly combining or conspiring with an uncertified or unregistered person by allowing his certificate registration to be used by the uncertified or unregistered person with the intent to evade the provisions of this part. When a certificate holder or registrant allows his certificate or registration to be used by one or more business organizations without having any active participation in the operations, management, or control of such business organizations, such act constitutes prima facie evidence of an intent to evade the provisions of this part;

(g) Acting in the capacity of a contractor under any certificate or registration issued hereunder except in the name of the certificate holder or registrant as set forth on the issued certificate or registration, or in accordance with the personnel of the certificate holder or registrant as set forth in the application for the certificate or registration, or as later changed as provided in this part;

(h) Committing mismanagement or misconduct in the practice of contracting that causes financial harm to a customer. Financial mismanagement or misconduct occurs when:

1. Valid liens have been recorded against the property of a contractor's customer for supplies or services ordered by the contractor for the customer's job; the contractor has received funds from the customer to pay for the supplies or services; and, the contractor has not had the liens removed from the property, by payment or by bond, within 30 days after the date of such liens.

2. The contractor has abandoned a customer's job and the percentage of completion is less than the percentage of the total contract price paid to the contractor as of the time of abandonment, unless the contractor is entitled to retain such funds under the terms of the contract or refunds the excess funds within 30 days after the date the job is abandoned.

3. The contractor's job has been completed, and it is shown that the customer has had to pay more for the contracted job than the original contract price, as adjusted for subsequent change orders, unless such increase in cost was the result of circumstances beyond the control of the contractor, was the result of circumstances caused by the customer, or was otherwise permitted by the terms of the contract between the contractor and the customer.

(i) Being disciplined by any municipality or county for an act or violation of this part, which discipline shall be reviewed by the board before the board takes any disciplinary action of its own.

(j) Failing in any material respect to comply with the provisions of this part.

(k) Abandoning a construction project in which the contractor is engaged or under contract as a contractor. A project is to be considered abandoned after 90 days if the contractor terminates the project without notification to the prospective owner and without just cause.

(l) Signing a statement with respect to a project or contract falsely indicating that the work is bonded; falsely indicating that payment has been made for all subcontracted work, labor, and materials which results in a financial loss to the owner, purchaser, or contractor; or falsely indicating that workers' compensation and public liability insurance are provided.

(m) Being found guilty of fraud or deceit or of gross negligence, incompetency, or misconduct in the practice of contracting.

(n) Proceeding on any job without obtaining applicable local building department permits and inspections.

(3) If a contractor disciplined under subsection (1) is a qualifying agent for a business organization and the violation was performed in connection with a construction project undertaken by that business organization, the board may impose an additional administrative fine not to exceed \$1,000 against the business organization or against any partner, officer, director, trustee, or member if such person participated in the violation or knew or should have known of the violation and failed to take reasonable corrective action.

(4) The board may specify by rule the acts or omissions which constitute violations of this section.

(5) The board is authorized to take the following disciplinary action:

(a) Suspend the certificate holder or registrant from all operations as a contractor during the period fixed by the board but the board may permit the certificate holder or registrant to complete any contracts then uncompleted.

(b) Revoke a certificate or registration.

(c) Impose an administrative fine or penalty not to exceed \$1,000.00 (which shall be recoverable by the board only in an action at law).

(d) Require restitution and impose reasonable investigative and legal costs.

(6) After suspension of the certificate or registration on any grounds set forth in this section, the board may remove the suspension on proof of compliance by the contractor with all conditions prescribed by the board for removal of suspension, or, in the absence of the conditions, as in the sound discretion of the board.

(7) After revocation of a certificate or registration, the certificate or registration shall not be renewed or reissued for at least one year after revocation and then only on a showing of rehabilitation of the contractor. The lapse or suspension of a certificate or registration by operation of law or by order to the board or a court, or its voluntary surrender by a certificate holder or registrant does not deprive the board of jurisdiction to investigate or act in disciplinary proceedings against the certificate holder or registrant.

(8) The board may restrain any violation of this part by action in a court of competent jurisdiction.



**Pinellas
County
Construction
Licensing
Board**

To: APPLICANTS TO QUALIFY A BUSINESS ORGANIZATION

From: RODNEY S. FISCHER, EXECUTIVE DIRECTOR

Subject: YOUR RESPONSIBILITIES/PERSONAL LIABILITY

Some contractors are not aware of the requirements imposed by their qualification of a business organization. When considering qualifying a business, please keep in mind:

1. All primary qualifying agents for a business organization are jointly and equally responsible for supervision of all operations of the business; for all field work at all sites; and for financial matters, both for the organization in general and for each specific job.
2. A qualifier is personally liable where construction defects result from his failure to exercise due care in carrying out his statutorily-imposed duty of construction supervisor.
3. A qualifier must have final approval authority on all checks, drafts, or payments, regardless of the form of payment, and must have final approval authority for all construction work performed by the entity.
4. The qualifying agent will still be responsible for the negligence of his surrogates regardless of the care which may have been exercised in selecting the latter and regardless of whether the latter is an independent contractor or employee of the qualifier's firm.

Your responsibilities as a licensed construction professional are similar to those of an engineer or architect. You may be held individually responsible for actions of the business.