

**TOWN OF GOLDEN BEACH  
CONTRACTOR REGISTRATION  
FORM**

<b>COMPANY NAME &amp; COMPLETE MAILING ADDRESS</b>	<b>Trade:</b>	<b>Contractor Registration</b>
	<b>Phone:</b>	<b>Initial: \$50.00</b> _____
	<b>Fax:</b>	<b>Renewal: \$30.00</b> _____
	<b>Cellular:</b>	<b>Paid by Check:</b>
<b>Print Qualifier's Name:</b> →	<b>Qualifiers Signature</b>	<b>Date Paid:</b>
<b>LICENSING INFORMATION</b>	<b>LICENSE NUMBERS:</b>	<b>EXPIRATION DATES:</b>
State of Florida - Certified or Registered (circle one)		
State of Florida - Qualified Business License		
Miami Dade County - Certificate of Competency		
Miami Dade County - Municipal Contractor		
Local Business Tax; Miami Dade _____ Broward _____		
Other		
<b>INSURANCE COMPANY INFORMATION-LIABILITY</b>	<b>INSURANCE COMPANY INFORMATION-WORKERS' COMP</b>	
<b>Expiration Date:</b>	<b>Expiration Date:</b>	

**EMERGENCY CONTACT -Name, Address & Phone**

<b>Phone:</b> _____ <b>Email Address:</b> _____

The following must be attached to this form for processing:

1) Photo Copies of all licensing 2) Qualifier Identification with photo and signature 3) Insurance Certificates with the Town of Golden Beach as Certificate holder, faxed directly from the insurance company, to (305) 933-3825, or submit originals Insurance Certificates at the time of registration

4). Complete this form in it's entirety

**DO NOT FAX**

**PRESENT THIS FORM AT TIME OF PERMITTING**