



City of Pahokee

207 Begonia Drive
Pahokee, Florida 33476
Phone: (561) 924-5534 ext. 2003 or 2004
Fax: (561) 924-8140

Contractor Registration Application

Company Name: _____

Company Address: _____
Street City State Zip

Mailing (if different): _____
Street City State Zip

Business Phone: _____ Cell Phone: _____ Fax: _____

Email: _____ Number of Employees: _____

Qualifier's Name: _____ Phone: _____
First M.I. Last

Driver's License #: _____ Contractor License #: _____

Home Address: _____
Street City State Zip

Qualifier's Signature: _____

Please provide legible copies of the following:

- County Occupational License: (Ord. 72-13)
- Palm Beach County Certificate of Competency (if applicable) (F.S. 489.115)
- State Certification or Registration (F.S. 489.115)
- General Liability Insurance (Certificate Holder: City of Pahokee)
- Worker's Compensation Insurance or exemption (Certificate Holder: City of Pahokee)
- Qualifier's Driver's License / photo identification

Business Owner (if different from qualifier)

Owner's Name: _____ Phone: _____
First M.I. Last

Home Address: _____
Street City State Zip

Note: For more than one qualifier, please complete one form per qualifier.
No permits will be issued without completion of this form.