

VOLUNTARY REGISTRATION FOR STATE-CERTIFIED CONTRACTORS

STATE-CERTIFIED VOLUNTARY REGISTRATION CHECKLIST

- ☐ Copy of State License (actual certificate not summary from state website)
- ☐ Copy of the Business Tax Receipt (Occupational License) from the County where your office is located.
If you are located in Collier County, you must have a Collier County Business Tax Receipt. Call (239) 252-2477 for further information.
- ☐ Certificate of Contractor's General Liability Insurance (minimum requirements for your category) showing Collier County Contractor Licensing Board as the Certificate Holder.
- ☐ Workmen's' Compensation Certificate of Insurance showing Collier County Contractor Licensing Board as the Certificate Holder and/or a copy of Workers' Comp Exemption filed with the State. **NOTE:** Qualifier(s)/License Holder(s) are required to be listed on the policy as "Included" or "Excluded".
- ☐ Portal access fee of **\$45.00 for each license being submitted**. You may pay by check, card, or cash. Make checks payable to: *"Board of Collier County Commissioners"*. **This is for use of our online portal and permitting system only.**
- ☐ Copy of Driver's License

If you have any questions, please contact Contractor Licensing:

MAIN #: (239) 252-2431

VOLUNTARY REGISTRATION FOR STATE-CERTIFIED CONTRACTORS

STATE-CERTIFIED VOLUNTARY REGISTRATION FORM

INSTRUCTIONS: Please complete the below form. Do not leave any blank spaces. The fee of **\$45.00** is for use of our online portal and permitting system only. The fee is **NOT** refundable after the application has been accepted and recorded. All checks should be made payable to the *"Board of Collier County Commissioners"*.

License Holder: _____
Last Name First Name MI

Home Address: _____
Street City State Zip

E-mail Address: _____

Driver's License # (Last 4 Only) _____ **Date of Birth:** _____

State License #: _____

Name of Company: _____

D.B.A _____

Mailing Address: _____
Street City State Zip

Phones - Business: _____ **Cell:** _____ **Fax:** _____

Physical Address (if different from mailing address):

Street City State Zip

License Holder's Signature

License Holder Printed Name

All State Certified Voluntary Registrations must be submitted via the GMD Public Portal.

See link below:

<https://www.colliercountyfl.gov/home/showdocument?id=97227>