



**CONTRACTOR'S REGISTRATION APPLICATION
&
PERMIT AUTHORIZATION FORM**

**TOWN OF LAKE PARK
COMMUNITY DEVELOPMENT DEPARTMENT
535 PARK AVENUE LAKE PARK, FL 33403
Phone (561) 881-3318 Fax (561) 881-3323
www.lakeparkflorida.gov**

DATE _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

BUSINESS PHONE _____ **E-MAIL ADDRESS** _____

CONTRACTOR TYPE _____

QUALIFIER NAME _____

QUALIFIER PHONE _____

STATE LICENSE NUMBER _____ **OR**

P.B.C. CONTRACTOR CERTIFICATE OF COMPETENCY # _____

In order to register as a Contractor in the Town of Lake Park, the following current documents must be submitted:

- A Certificate of Liability Insurance indicating General Liability and Workers Compensation coverage, naming the Town of Lake Park as the Certificate Holder
- A Certificate of Workers Compensation or Exemption if you are qualify under Florida Statute
- For State Contractors: State Certification
- County or Municipal BTR (Business Tax Receipt) – If applicable

REGISTRATION FEES:

*Registration Fees will apply if a Business Tax Receipt is not available

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**CONTRACTOR AUTHORIZATION
TO CONDUCT BUSINESS RELATING TO
BUILDING PERMITS**

I, _____, Qualifier, do hereby authorize the following person(s) to conduct business relating to Town of Lake Park Building Permits on my behalf:

Name of Authorized Agent

Name of Authorized Agent

OR

I do not authorize anyone to conduct business relating to Town of Lake Park Building Permits on my behalf.

Qualifier Signature

Date

State of Florida, County of _____

The foregoing instrument was acknowledged before me on this _____

day of _____, 20____, by _____
(Name of Person Acknowledging)

who is personally known to me _____ or

has produced identification _____

NOTARY SIGNATURE

NOTARY SEAL

FOR OFFICE USE ONLY: PLEASE DO NOT WRITE BELOW THIS LINE

DATE: _____

RECEIVED BY _____

AMOUNT: _____

RECEIPT # _____

REVISED: JUNE 27, 2018