



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

***Contractors Must Submit the Following Items
With the Registration Application***

Email to: Permits@loxahatcheegrovesfl.gov

- Palm Beach County/County-wide Business Tax Receipt for the current fiscal year.
- A copy of the Qualifiers Driver's License or photo identification.
- Palm Beach County Certificate of Competency and/or State of Florida Department of Business and Professional Regulation License.
- Certificate of Liability Insurance, naming The Town of Loxahatchee Groves as Certificate Holder.
- Certificate of Workers Compensation Insurance or Exemption Certificate.
- Certified State License holders based in another County must provide a copy of their Business Tax Receipt for the County in which they are based.



Town of Loxahatchee Groves

155 F Rd. • Loxahatchee Groves. FL 33470 • (561) 793-2418 • Fax (561) 793-2420 • www.loxahatchceegrovesfl.gov

CONTRACTORS APPLICATION FOR REGISTRATION FEE \$2.00

Date: _____

Name of Business: _____

Address of Business: _____

Mailing Address: _____ Email: _____

Business Phone: _____ Emergency Phone: _____

Owner's Name: _____

THE FOLLOWING DOCUMENTS MUST BE SUMMITTED IN ORDER TO ISSUE THE BUSINESS TAX RECEIPT:

COUNTY BUSINESS TAX RECEIPT:

County or County-Wide Business Tax Receipt (If Applicable). Please Note: Any holder of a County-Wide Business Tax may purchase a Town Business Tax Receipt for \$2.00. All Others will pay the full fee.

CERTIFICATE OF INSURANCE:

Certificates of Insurance (Liability and Worker's Compensation) issued to the Town of Loxahatchee Groves.

ARTICLES OF INCORPORATION:

First Page of Articles of Incorporation, Corporate Seal or Copy of Fictitious Name (Found on Sunbiz).

CERTIFICATE OF COMPETENCY OR STATE LICENSE: (Please check one and place License# inside box)

The following is a list of Contractors who are required by Florida Law, Chapter 85-278, to have a State License.

| | | |
|------------------------|-----------------------|------------------------------|
| GENERAL CONTRACTOR | PLUMBING CONTRACTOR | SWIMMING POOL CONTRACTOR |
| BUILDING CONTRACTOR | MECHANICAL CONTRACTOR | SPECIALTY CONTRACTOR |
| RESIDENTIAL CONTRACTOR | ROOFING CONTRACTOR | UNDERGROUND UTIL. CONTRACTOR |
| ELECTRICAL CONTRACTOR | SOLAR CONTRACTOR | SHEET METAL CONTRACTOR |

QUALIFIER INFORMATION

SIGNATURE MUST BE NOTARIZED IF THIS DOCUMENT IS PRESENTED BY SOMEONE OTHER THAN THE QUALIFIER.

STATE LICENSE NUMBER OR COUNTY TAX RECEIPT NUMBER

NAME _____ TITLE _____

ADDRESS _____

TAX ID# _____ DATE OF BIRTH _____ DRIVERS LICENSE# _____

PHONE _____ EMERGENCY PHONE _____

QUALIFIER'S SIGNATURE