



BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

CONTRACTOR REGISTRATION FORM

Date: _____ Business Phone: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Nature of Business: _____

Owner's / Qualifier Name: _____

Driver's License #: _____ Home Phone: _____

SIGNATURE: _____ DATE: _____

PLEASE SUBMIT A COPY OF THE FOLLOWING IF IT APPLIES TO YOUR OCCUPATION:

CONTRACTORS MUST PRESENT THE FOLLOWING:

COUNTY OCCUPATIONAL LICENSE, PALM BEACH COUNTY CERTIFICATION, STATE OF FLORIDA CERTIFICATION OR REGISTRATION, CERTIFICATE OF LIABILITY INSURANCE AND WORKMANS COMPENSATION OR EXEMPTION AND A COPY OF THE QUALIFIER'S DRIVER'S LICENSE.