



# HENDRY COUNTY BUILDING LICENSING & CODE ENFORCEMENT

POST OFFICE BOX 2340 • 640 SOUTH MAIN STREET • LABELLE, FLORIDA 33975 • (863) 675-5245 • FAX: (863) 674-4194 •  
1100 OLYMPIA ST – CLEWISTON, FLORIDA 33440 – PHONE (863) 983-1463 – FAX: (863) 983-1467

## APPLICATION FOR HENDRY COUNTY CERTIFICATE OF COMPETENCY

**I. Applicant's Name:** \_\_\_\_\_

Type of License or Certificate of Competency Requested: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

Mailing Address: \_\_\_\_\_  
Street City State Zip

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

Office Phone: ( ) \_\_\_\_\_ Fax Number: \_\_\_\_\_

**II. Company Name:** \_\_\_\_\_

Name of Company to be qualified, fictitious name to be used, or if no company name will be used, write "individual"

Street Address: \_\_\_\_\_  
Street City State Zip

Mailing address: \_\_\_\_\_  
Street City State Zip

Office Phone: ( ) \_\_\_\_\_ Fax Number: \_\_\_\_\_

### III. Exam Verification:

Attach proof that you have taken and passed the appropriate exam(s). Acceptable proof includes a copy of the Experior, Thompson/Prometric, Block & Associates or NAI-Block test result form, or a letter of reciprocity from another Florida jurisdiction (with exam results and date of exam attached).

**IV. Experience Verification:**

Attach **original notarized documents** verifying that you have the necessary experience in the area covered by the certificate of competency you are seeking. These documents should be on forms provided by the Department and completed by past or present employers licensed and actively engaged in the construction services field. Proof of licensure by other jurisdictions, without additional experience verification, will not satisfy this requirement. **The Board can refuse to accept any statement: (1) that is not clearly an original document or (2) where the face of the document provides evidence that the statement has been changed from its original form.**

**Current License:**

List any current Certificate of Competency or other construction license(s) you hold in Hendry County or in any other jurisdiction (attach copies of listed licenses to application):

---

---

---

---

---

---

**V. Financial Responsibility:**

All applicants must answer the following questions. If you answer Ayes@ to any of them, a full written explanation is required. If you are applying to qualify a corporation, partnership or other legal business entity, officers of that entity (e.g., president, vice president, secretary, partners or owner of proprietorship) must also provide an explanation if a “yes” answer to any of these questions pertain to them.

**HAVE YOU** (or a partnership in which you were a partner or an authorized representative, or a corporation in which you were an officer or an authorized representative) **EVER:**

Yes	No	
		Undertaken a construction contract or work that a third party, such as a bonding or surety company, completed or made financial statements on?
		Had claims or lawsuits filed for unpaid or past due accounts by your creditors as a result of construction operations?
		Undertaken construction contracts or work which resulted in liens, suits or judgments being filed which were not satisfied without damage or harm to any 3rd party?

		Had a lien filed against you by the U.S. Internal Revenue Service or Florida tax division?
		Made an assignment of assets in settlement of construction obligations for less than the outstanding debts?
		Been charged with or convicted of acting as a contractor without a license, or if licensed as a contractor in this or any other state, had a disciplinary action against your license?
		Filed bankruptcy, personal or business, in the last five years? [*Important, see "Note" below]
		Been found guilty of any crime other than a traffic violation?

**DID YOU ANSWER "YES" TO ANY OF THE ABOVE?** Any applicant-answering yes to one of the financial responsibility questions must provide the Board with an explanation. The explanation should be a written statement outlining the steps the applicant has taken to prevent a recurrence of the circumstances leading to the conviction, judgment, discipline, bankruptcy or other event involved. The applicant is also required to attach any applicable proof of payment, satisfaction of lien or judgment, bankruptcy discharge or agreements for payment.

**\* NOTE: DID YOU PREVIOUSLY FILE BANKRUPTCY:** If you have previously filed Bankruptcy you should be sure that all of your creditors show no outstanding or unpaid balance on your credit report. You may have to obtain and provide the Construction Licensing Board with additional information if any account listed in your credit report shows an outstanding or unpaid balance that you believe was discharged by your Bankruptcy. **Additional information should be included with this application.**

**VI. Qualifying a Company Name or Operating in your Individual Name on your license**

**Section A. MUST BE COMPLETED BY ALL APPLICANTS**

*I (Applicant's Name) , \_\_\_\_\_ acknowledge that in accordance with the Hendry County Construction Licensing Ordinance, I am personally responsible for all of the financial affairs of the business I am applying to qualify. I realize that this includes "financial matters", both for the organization in general and for each specific job.*

\_\_\_\_\_  
Applicant's Signature

**Section B. MUST BE COMPLETED BY ALL APPLICANTS OPERATING AS A COMPANY OR CORPORATION**

1. Sole Proprietorship - owner must sign
2. Partnership - a partner must sign
3. Corporation - corporate secretary must sign
4. Individual Name - mark N/A

**Section C**

At a meeting of (Company Name), \_\_\_\_\_ held on the day of \_\_\_\_\_, 20\_\_\_\_\_, (Name of Applicant) \_\_\_\_\_ was legally appointed as the qualifier to act for the business organization in all matters connected with its contracting business, and was given authority to supervise construction undertaken by the business.

\_\_\_\_\_  
Signed by Secretary, Partner or Owner

**VII. Previous Certificates:**

For any response in the affirmative, attach additional information for explanation.

Yes	No	
		Have you ever been granted a Hendry County Certificate of Competency? License Number _____ Certificate Category _____
		Did you voluntarily relinquish this license?
		Did you allow this license to lapse after it was placed on involuntary inactive status? A Hendry County Certificate of Competency can be placed on involuntary inactive status for (1) failure to renew the license; (2) failure to maintain liability insurance; or (3) failure to maintain workers=compensation insurance (or an exemption). (If appropriate action is not taken within 6 months of the date the license is placed on inactive status, the license lapses.)
		Was the license revoked or suspended? If yes, attach an explanation of the steps you have taken to avoid a similar occurrence in the future and proof of compliance with any final order against you regarding this license.
		Have you ever been issued a license by a jurisdiction outside Hendry County that was revoked, suspended or voluntarily relinquished? If, yes, attach an explanation of the circumstances involved.

**VIII. Organizational Relationships:**

Do you qualify or own a business other than the one you are applying to qualify? Yes \_\_\_\_ No \_\_\_\_

If yes, please ensure that you have completed the application form to qualify another business or contact the Department for guidelines to qualify more than one business.

**IX. Federal Employer Identification Number:**

Note: All corporations must have a number. If the company has no employees, write your social security number.

Federal Employer Identification Number: \_\_\_\_\_

**X. Corporations:**

Attach a copy of the Annual Report Form filed with the Florida Secretary of State or, if your corporation is newly established, attach a copy of the Florida Certificate of Incorporation and the page listing the corporate officers. *If you are not a corporate officer in the corporation you wish to qualify, a Resolution of Authorization must be completed; contact the contractor licensing office for the required form.*

**XI. Fictitious Name:**

Attach a copy of the recorded Fictitious Name Registration and Ownership form from the Division of Corporations. (This does not apply to corporations using their registered name.) Fictitious Name Registration packets may be obtained at the contractor licensing office or by contacting Fictitious Name Registration, P.O. Box 1300, Tallahassee, FL 32303-1300, and tel. (850) 488-9000. *If you are not a partner or owner in the company you wish to qualify, a Resolution of Authorization must be completed; contact the contractor licensing office for the required form.*

**XII. Photographic Identification:**

Attach to this application a legible copy of your driver's license or other official state identification that contains a photograph. **A photo I.D. may be required at the hearing or prior to issuance of the Competency Card.**

---

**NOTICE:** You may view the Hendry County Construction Licensing Regulations by visiting the Hendry County Clerk of Court's Website. [HendryClerk.org](http://HendryClerk.org). Once you arrive at the website, select the "records" link; then select the "Code of Ordinances" link. This will transfer you to the Municipal Code website and contain the Code of Ordinances for Hendry County. You will need to select Chapter 58 and then you may select Contractor Licensing.

**The Hendry County Clerk's office may also (for a fee) make a certified copy of this Code at either offices (LaBelle/Clewiston).**

**NOTICE:** Applicants that obtain licenses that require State of Florida Registration must provide proof of State Registration within 90 days from final Board Action.

---

**XV. Credit Report: You must supply the following credit report(s):**

A credit report in your individual name (***required for all applicants***).

A credit report is **also** required for the company name you are applying to qualify if the date on the corporation or fictitious name documents is more than forty-five (45) days old). If your company is newly established, you must also submit letters from construction related suppliers indicating that an account either exists or has been opened for the entity you are applying to qualify.

A credit report in any business you currently own or qualify or any business you owned or qualified within the past five (5) years.

---

**Only complete, original reports must be submitted. No faxes or copies will be accepted. All pages must be numbered.**

The credit report must not be more than six (6) months old.

The credit report must be from a Nationally recognized credit reporting agency will be accepted. The Construction Licensing Board will not accept a credit profile or a financial statement. A credit report from the Internet may not be acceptable.

---

Credit agencies generally require written authorization to accurately check your credit references. It is your responsibility to provide them with this authorization. ***Public records pertaining to judgments, bankruptcies and tax liens must be searched and results noted on the credit report.***

**IMPORTANT:** If the public records reflect unsatisfied obligations, attach a written explanation and legal documentation to the credit report or provide a copy to the Department. **The credit report should also reflect officers, partners and proprietors, their Social Security numbers and the FEIN.**

**IMPORTANT NOTE IF YOU PREVIOUSLY FILED BANKRUPTCY:** If you have previously filed Bankruptcy you should be sure that all of your creditors show no outstanding or unpaid balance on your credit report. You may have to obtain and provide the Construction Licensing Board with additional information if any account listed in your credit report shows an outstanding or unpaid balance that you believe was discharged by your Bankruptcy. **Additional information should be included with this application.**

If the credit report is not attached to the application you may have the credit agency send the credit report directly to: **Hendry County Building, Licensing and Code Enforcement Department,**

**Attention: Contractor Licensing, P.O. Box 2340, LaBelle, Florida 33975.**

**YOU MUST COMPLETE THE FOLLOWING STATEMENT:**

A credit report for \_\_\_\_\_  
(Applicant's name and/or name of business organization being qualified)

was requested on \_\_\_\_\_ To be sent from \_\_\_\_\_  
(Date) (Name of Credit Reporting Agency)

**XVI. Verification of General Liability Insurance and Worker's Compensation (or Exemption from Workers' Compensation Law) Insurance:**

DO NOT SEND A CERTIFICATE OF INSURANCE OR EXEMPTION AT THIS TIME

I have or will obtain public liability and property damage insurance in the amounts required by the Hendry County Construction Licensing Ordinance for the business organization I am applying to qualify. I further certify that I have or will obtain Workers' Compensation insurance in accordance with the Construction Licensing Ordinance and F.S. Ch. 440. I will maintain such insurance for the safety and welfare of the public at all times that my certificate is active. I understand that I may be required to submit proof of insurance or an accepted exemption (for workers' compensation) at any time. I further certify that I will not seek employment or work outside of the scope of any licenses that I may hold now or in the future.

I affirm that these statements are true and correct and I recognize that providing false information may result in a fine, suspension or revocation of my contractor's license.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**XVII. Certification:**

**I hereby certify** that all of the information in this application is true and correct to the best of my knowledge. As a basis for the grant of licensure, I agree to comply with all codes, laws and regulations applicable to my trade and I will not undertake any work that is outside the scope of the license I have been granted. I understand that any misrepresentation with respect to the information provided in this application, or future submissions applicable to retaining any licensing granted to me, may be grounds for the denial or revocation of my Hendry County Certificate of Competency.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

State of \_\_\_\_\_  
[The State and County of execution must be filled in by the Notary Public.]

County of \_\_\_\_\_

Under oath, before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_,

\_\_\_\_\_ who is personally known to me, or who has produced  
(Name of applicant)

\_\_\_\_\_ as identification, stated the foregoing facts were true.

\_\_\_\_\_  
Notary Public  
Printed Name:  
[stamp or seal]

### **Application Review:**

Your application should be complete at the time it is submitted to the Contractor Licensing Office. Failure to submit a complete application may delay review or result in a denial of your application. You will be scheduled for the next available hearing after receipt of your complete application. However, all material must be received ten (10) days prior to hearing date. The Construction Licensing Board will review your application at a regularly scheduled meeting. (Meetings are at 6:30 P.M., the fourth Thursday each month at Commission Chambers, 25 East Hickpoochee Avenue, LaBelle, FL. 33935.) You will receive a letter confirming the date, time and location your application will be presented to the Construction Licensing Board. County regulations require that you be present at this meeting to address any questions the Board may have concerning your application. ***Failure to attend this meeting to answer questions may result in a denial of your application. In order to be prepared for this meeting, you should retain a complete copy of this application.***

If the Construction Licensing Board approves your application, a letter will be forwarded to you stating any additional information required prior to issuance of a Certificate of Competency Card.

### **State Registration:**

Master Electricians, Alarm System Contractor I, Alarm System Contractor II, Aluminum Specialty Structure and Drywall contractors are required to register with the Department of Business and Professional Regulation prior to receiving a Hendry County Competency Card.

**YOU WILL BE REQUIRED TO PROVE THE FOLLOWING NUMBER OF YEARS OF "HANDS ON" EXPERIENCE IN YOUR TRADE TO THE CONSTRUCTION LICENSING BOARD:**

#### **SIX YEARS (6):**

Master Electrician



**FOUR YEARS (4):**

General Contractor  
Building Contractor  
Residential Contractor  
Class A Air Condition Contractor  
Class B Air Condition Contractor  
Commercial Pool/Spa Contractor  
Residential Pool/Spa Contractor  
Sheet Metal  
Mechanical  
Plumbing  
Solar Water  
Underground Utilities  
Asbestos Abatement Contractor  
Roofing Contractor  
Pollutant Storage System Contractor  
Drywall Contractor  
Electrical Contractor  
Journeyman Electrical Contractor  
Journeyman Mechanical Contractor  
Journeyman Plumber Contractor  
Swimming Pool/Spa Servicing Contractor  
Aluminum Specialty Structure  
Marciting  
Paving  
Plaster/Stucco Contractor  
Sign Contractor  
Concrete Forming and Placing  
Carpentry  
Concrete Forming and Placing  
Demolition  
Dredging  
Excavation  
Gunite  
Marine  
Masonry  
Pile Driving  
Reinforcing Steel  
Structural Steel Erection

**THREE YEARS (3):**

Awning Contractor  
Concrete Placing and Finishing  
Courts (outdoor) Contractor  
Drywall  
Glass & Glazing  
Insulation (all types) Contractor

**TWO YEARS (2):**

Aluminum Non-Structural  
Asphalt Sealing and Coating  
Concrete Coatings  
Fence Erection  
Finish Carpentry  
Garage Doors  
Gutter and Downspout  
Insulation (building) Contractor  
Irrigation Sprinkler  
Painting  
Paver Block Contractor  
River Rock  
Sandblasting  
Sign Contractor Restricted  
Terrazzo  
Tile and Marble

**Additional State Registration with the State Of Florida  
Required for the following Contractors:**

General, Building, Residential, Class A Air Conditioning, Class B Air Conditioning, Commercial Pool/Spa, Residential Pool/Spa, Swimming Pool Servicing, Sheet Metal, Mechanical, Plumbing, Solar Water Heating, Underground Utilities and Excavation, Asbestos Abatement, Roofing, Pollutant Storage System, Master Electricians, Alarm System Contractor I, Alarm System Contractor II, Aluminum Specialty Structure, Drywall and Electrical contractors.