Office of Planning and Development Building Division PO Box 9005, Drawer GM02 330 W. Church Street Bartow, Florida, 33831-9005 863-534-6530



www.polk-county.net/aca contractorlicensing@polk-county.net

## State Certified Registration Form

Compa	any Name:
Licens	e Holder Name:
Phone	Number:
Mailin	g Address:
	Address:
	u want a trust account? Yes No
	is a list of items that is required to register any State Certified License with Polk County ng Division. There is no registration fee assessed for State Certified License holders.
1.	Copy of current Business Tax Receipt/Occupational License from a county or city in the State of Florida.
	Polk County's Contractor Construction Waste and Setback Acknowledgement form General Liability Insurance Certificate
	Workers comp insurance certificate or exemption in the license holder's name. The Certificate holder portion of your insurance certificates read as follows:
	Polk County Building Division 330 W Church Street Bartow, FL 33831
5.	Accela Associated User Form, is optional for the license holder to give others access to

apply for permits with their license.