CONSTRUCTION INDUSTRY LICENSING BOARD OF PALM BEACH COUNTY

2300 N Jog Road, Suite 2W-61, West Palm Beach, Fl 33411-2741

Phone: (561) 233-5525

Received Date Stamp: For office use only

Thank you for applying for a certificate of competency. Please note this application package includes the following:

- 1. Application (Sections 1 thru 10)
- 2. Step by Step Application Instructions
- 3. Application forms
 - A. Business Financial Form
 - **B.** Employment History Form
 - C. Affidavit of Construction Experience Form
 - **D.** Qualifiers Responsibility Form
- 4. Informational/References
 - E. Exam requirements
 - F. Trade experience requisites
 - G. Background check requirement/providers
 - H. 14 Hour Financial Responsibility requirement/providers
 - I. Construction Industry Licensing Board (CILB) current meeting schedule

Please note: A completed application must be received by the 1st Friday of each month for such application to be considered by the CILB on the same month, holidays and scheduling permitted. Applications not deemed complete will not be scheduled for a CILB meeting until deemed completed.

Please mail or drop off your completed application, documentation and required fee(s) to:

> **Contractors Certification Division** 2300 N. Jog Rd, Suite 2W-61 West Palm Beach, FL 33411



Please type or print all information clearly; complete all sections of the application in its entirety. Additional information for each section is outlined in the step by step application instructions.

Section 1 – Type of Application					
1.1.	<u>Type</u> (Check One): □by Examin	nation or [□by Reciprocit _County	y from	
	Classification / Trade (Check One) General □ Building □ Re Specialty (specify trade):		■ Electrical	☐ Plumbing	□ HARV
1.3.	Certificate Status:	ctive or	☐ Inactive		
1.4.	Application Review Fee (Check O			Ionev Order, Ca	ashier's Check, etc.
	(.	2.1.Phot Attach photo	tograph o in this area)	-	
		2.2.Full	Legal Name		
First	t:	Middle:		Last:	
Birtl	h Date: (mm/dd/vyvy)		Gender:		

☐ Male

☐ Female



2.3. Citizenship Status

U.S. Social Security #: Driver		's License #			Issuing State:
Place of Birth:					1
Citizen of the United States? (if no, provide documentation as to residency status) Yes No					
	2.4 D:	14:-1 4 1.	1		
C. A.11		lential Ado	aress	TT	DI
Street Address: (No	o PO Box)			Hom	e Phone:
City:	State:		Zip code:	Cell	Phone:
Email:			<u> </u>	<u> </u>	
Section	on 3 – Bu	siness In	formation		
3.1.Company Information					
	/CORP/LL	C (include	d/b/a/ if app	licable)	
Name of Company Owner:					
Business Address: (No PO Box)			Suite:	Business	s Phone:
City:	State:	Zij	p code:	Business	Fax:
Email:		I		1	
Date Company Established:		Federal En	mployee Idei	ntification 1	Number:(FEIN)



3.2.Business Questionnaire					
a. I am qualifying for a (check one): □ Sole Proprietorship □ Partnership □ Corporation or LLC b. Will you, as the qualifying agent have any ownership in the firm? (check one): □ Yes □ No c. If yes please describe ownership type and percentage; be sure to include proof of ownership.					
	 d. Will you be supervising employees of this company (check one): ☐ Yes e. If yes, please provide the number of employees and their duties. 				
f. Please describe	your Supervision duty under your	trade:			
g. Do you hold any current Construction/Trade licenses?: \(\sigma\) Yes \(\sigma\) No h. If yes, please list (include copies).					
3.3. Complete this section if you are qualifying a Corporation or an LLC:					
Title	Officer or Member Name	Home Address, City, State, Zip, & Contact number			



Section 4 -Background Questions

4.1. Have you ever been convicted, found guilty of, or entered a plea of <i>nolo</i> contendere to, regardless of adjudication a crime in any jurisdiction? This question applies to any criminal violation of the laws of any municipality; which includes county, state, or federal without regard to whether you were placed on probation, had adjudication withheld, were paroled, or pardoned. Traffic offenses and civil citations which include parking, speeding, inspections and traffic signals are exempt.	☐ Yes	□ No
If you intend to answer "no" because you believe your records are expunged or sealed by court order pursuant to section 943.0585 or 943.059 of Florida Statute or the applicable law of another state, proof of expungement may need to be provided if the expunged records appear on a background check. Your answer to this question will be checked against local, state, and federal records. Failure to answer this question accurately may result in the denial of your application.		
4.2. Have you ever had any construction related trade certificate of competency license denied, or is there now pending a proceeding or investigation to deny such an application from any construction related certificate of competency licensee authority (Federal, State, County or municipal) within the United States?	☐ Yes	□ No
4.3. Has any license, registration, or permit to practice any regulated profession, occupation, vocation, or business been revoked, annulled, suspended, relinquished, surrendered, or otherwise disciplined in Florida or in any other jurisdiction, or is any such proceeding or investigation now pending?	☐ Yes	□ No
4.4. Have you been charged with acting as a contractor without a license, (issued Notice of Non-Compliance, Notice of Violation or a Citation), convicted of same, and received any disciplinary action (including a fine(s) such as a citation or reprimand) by any State, County or Municipality.	☐ Yes	□ No

Section 5 - Explanation Section

If you answered yes to **any** of the questions in Section IV, please complete Section V, **explain in detail** in the section provided, and include any supporting legal documents. If necessary, include explanation on a separate sheet.

Background Summary		
Offense:		
County:	State:	
Penalty/ Disposition:		
Date of Offense: (mm/dd/yyyy)	Have all sanctions been satisfied? ☐ Yes ☐ No	
Description:		



Section 6 - Financial Responsibility & Stability

6.1. Business Worthiness		
Are there any pending bankruptcies or unsatisfied judgments or liens against yourself, a business you previously qualified, which were filed during your period of qualification, or the business you're applying to qualify?		
If you answered yes to the above question, please complete section belo supporting legal documents. If necessary include explanation on a separate		
Type of Event:		
County:	State:	
Date of Event: (mm/dd/yyyy)	Have all sanctions been satisfied? ☐ Yes ☐ No	
Description:		
6.2.Credit Reports /Credit S	core	
Have you applied for your credit report? ☐ Yes ☐ No		
If so, from what company?		
When did you apply for your credit reports? (dd/mm/yyyy)		
Does the submitted credit report show a credit score of 660 or higher? ☐ Yes ☐ No		
If no, applicants with credit score between 580 to 659 may still meet the financial responsibility requirement by obtaining a certificate of completion from an approved 14-hour financial responsibility course from an approved provider. Otherwise you will need to re-apply once your credit score is 660 or higher. Applicants with credit score below 580 do not meet requirements and the application will be denied.		
6.3.Financial Responsibility Course (Option for applicants with credit score between 580 to 659)		
Have you completed a financial responsibility course approved by the Construction Industry Licensing Board? Yes No (If yes, please complete the fields below and provide copy of certificate)		
School Name:		
Name of Course:		
Dates Attended: (mm/dd/yyyy)		

6.4.Business Financials

Please fill out the following form to comply with this section

A. Business Financial Form -required



Section 7 – Employment

Please fill out the following forms to comply with this section under the employment requirement

- B. Employment History Form Required
- C. Affidavit of Construction Experience Form Required

Section 8 - Qualifier's Responsibility

If you the applicant is the only officer in the corporation, please check the following box and adhere to all responsibilities outlined in the Terms and Conditions Section. \Box

If there is a corporate officer involved in the structure of the company in addition to you the qualifier, please have them fill out the following form to comply with this section.

D. Qualifiers Responsibility Affidavit Form - (optional)

(Intentionally left blank)



Section 9 – Terms & Conditions

- **9.1.**I agree to authorize the CILB and its agents to obtain such additional information concerning applicant's financial condition, credit worthiness, criminal background report and experience as necessary from any source dealing with the applicant, even though said information might be deemed confidential.
- **9.2.**I understand that I may withdraw my application prior to Board review provided that I submit a written request at least (2) two business days prior to the meeting date when my application is scheduled and then I will only be entitled to receive a 50% application fee refund.
- **9.3.**I understand that if my application is not completed by the deadline date I will have (45) forty-five days from application review date to complete the process. Otherwise, I forfeit any fees paid and I will have to commence again if not deemed completed.
- **9.4.**I understand that I will have thirteen (13) months once application has been approved by the Board to complete any additional requirements for license issuance. Otherwise, my application becomes null and void.
- 9.5.I understand that the business name shall not be misleading as to the scope of certification held.
- **9.6.** In applying to qualify a company, corporation, partnership, limited partnership, or any type of business entity, I understand that I, as qualifying agent, am completely responsible for the actions of said business entity as they relate to its construction business.
- **9.7.**I understand that the CILB, by the authority granted to it, by the Special Act 67-1876, as amended, holds the qualifying agent (applicant) responsible for supervision of the sites as well as financial aspects of the entity's construction business, including, but not limited to, payment to subcontractors, suppliers, employees and Federal and State taxes.
- **9.8.**I understand that the Construction Industry Licensing Board of Palm Beach County holds me, as qualifying agent, responsible for any violation of Sections 10 and 11 of the Special Act 67-1876, which may be committed by the business entity I qualify. Section 10 of the Special Act 67-1876 sets forth various prohibited activities and Section 11 identifies those acts for which disciplinary action may be warranted.
- **9.9.**I certify that I will notify the CILB, in writing within 10 days if I as qualifying agent sever connections with the entity, or if I am no longer actively supervising the construction or installation work under contract.
- **9.10.** I certify that I will act for the partnership, firm or corporation for which I am qualifying in all matters concerning the contracting business, and I will actively supervise all construction work and be responsible for ascertaining that all such work is completed according to approved plans, applicable codes and good construction practices.
- **9.11.** I certify that I will act only for myself and that I am legally qualified to act on behalf of the business organization sought to be certified in all matters connected with its contracting business and that I have full authority to supervise construction undertaken by myself or such business organization and that I will continue during this certification to be able to so bind said business organization. If at any time during this certification, I cease to be able to so bind or act for the business organization, I will notify the CILB in writing within 10 days.
- **9.12.** Falsification of any information herein, including all supplemental pages and attachments, is grounds for disqualification. An application which is found to contain false information, a material misstatement or misrepresentation shall be denied by the Director or authorized designee.
- ☐ I have read and fully understand all the terms and conditions 1 through 12 outlined and referenced in Section 9. I have fully acknowledged the information and I am in agreement with the outlined terms and conditions in compliance with Chapter 67-1876 Special Act, and Laws of Florida, as amended.

Form CC-008 Rev. 12/9/16



Section 10 - Declaration of Written Affirmation

AFFIRMATION BY WRITTEN DECLARATION

I certify that I am empowered to execute this application as required under the provisions of Chapter 67-1876 Special Act, Laws of Florida, as amended, defining, regulating and governing contractors within the County of Palm Beach, Florida; I hereby apply for a certificate of competency to qualify as a contractor in Palm Beach County, Florida.

The undersigned hereby makes application for certification under the provisions of the Palm Beach County Certification Law, Chapter 67-1876, Special Act, Laws of Florida, as amended, and vouches for the truth and accuracy of all statements and answers herein.

I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in disqualification or administrative action, including denial, a fine, suspension or revocation of the license.

Signature	Date
Print Name	



Step by Step Instructions

By Section # on Application

Application must be accompanied by the outlined documentation per section to be submitted to the Construction Board.

Please Note: □ are provided as a checklist to ensure you have all Required documentation needed to submit an application.

Section 1 – Type of Application

1.1.Type:

a. <u>Examination</u>, you can take the test in your given construction trade prior to or after the Construction Industry Licensing Board (CILB) approves your Contractors Certification application. Please refer to exam requirements and testing agencies under <u>Informational/Reference E</u>.

Required Documents:

- ☐ Examination Results from an approved testing provider must be submitted directly to the office prior to application, during or after application submittal.
- b. Reciprocity, if applying by reciprocity, you must meet the following:
 - Trade experience must be equal or greater than the required trade experience for Palm Beach County. Please refer to **Informational/Reference F.**
 - Your examination results in the other jurisdiction must have been based on a minimum score of 75% on both Trade and Business & Law. Your exam score must be reflected on the reciprocity letter from the other jurisdiction which sponsored your original exam.
 - The trade scope must be equal to or similar with little or no variation than the one you are applying for in Palm Beach County. Must be currently licensed.
 - Please note: prior to 1993, a Business & Law examination was not required; if that is your case you will need to take the exam in Palm Beach County.

Required Documents:

- ☐ Reciprocal Letter must be mailed directly to the Contractors Certification office from the City or County issuing the letter prior to application submittal.
- ☐ Please submit a legal description of the trade scope which can be provided from the jurisdiction where you obtained the license.
- **1.2.** Classification/Trade: choose the type of license for which you are applying. Please reference the Standards for Certified Categories for the list of the trades and definitions.

Please reference trade requisites **Informational/References F**.

1.3. Certificate Status: choose if the certificate is to be issued active or inactive. An inactive status means you are licensed but not actively engaged in the trade. The reason some contractors prefer this option is so that they do not lose their licensing privileges and not have to retake examination should they decide to start practicing the trade. Once a contractor decides to activate his license, a Status Change Application must be completed and submitted for Board approval.

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1.4. Application Review Fee: please include a fee of \$225.00 with application submittal. Payment must be made to the BOCC –Board of County Commissioners. Application Review fee of \$225.00 is Non Refundable and submitted with application. The balance of \$225.00 is payable when application is deemed complete and ready to be put on Board agenda. You will be contacted by phone or email requesting the balance due.

Required:

□ \$225.00 Check or Money Order

Section 2 – Applicant Personal Information

- **2.1.**Photograph: please attach a 2 x 2 passport size photo.-required
- **2.2.**Full Legal Name: Please make sure to include your middle name or initial if you have one. Name must match all other official identification and documents submitted.
- **2.3.** <u>Citizenship Status</u>: Social Security number, driver's license information, citizenship and place of birth.

Required Documentation:

☐Proof of Citizenship: Resident Alien Card, or Wor	king Visa Documents, etc.
☐Social Security Card and	

□A clear copy of valid driver's license or other government issued photo identification.

NOTICE OF COLLECTION OF SOCIAL SECURITY NUMBERS FOR GOVERNMENT PURPOSES: UNDER THE FEDERAL PRIVACY ACT, DISCLOSURE OF SOCIAL SECURITY NUMBERS IS VOLUNTARY UNLESS SPECIFICALLY REQUIRED BY FEDERAL STATUTE. IN THIS INSTANCE, SOCIAL SECURITY NUMBERS ARE MANDATORY PURSUANT TO TITLE 42 UNITED STATES CODE, SECTIONS 653 AND 654: AND SECTIONS 409.2677 AND 409.2598, FLORIDA STATUES, TO ALLOW EFFICIENT SCREENING OF APPLICANTS AND LICENSES BY A TITLE IV-D CHILD SUPPORT AGENCY TO ASSURE COMPLIANCE WITH CHILD SUPPORT OBLIGATIONS. SOCIAL SECURITY NUMBERS MUST ALSO BE RECORDED ON ALL PROFESSIONAL AND OCCUPATIONAL LICENSE APPLICATIONS AND WILL BE USED FOR LICENSEE IDENTIFICATION PURSUANT TO THE PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996 (WELFARE REFORM ACT).

2.4.Residential Address: Please list the full permanent physical address of your residence and not of your business, if different. Do not list a Postal Office (PO) address. All official communication including license renewals are sent to the home address and not your business address, if different.

Section 3 – Business Information

3.1.Company Information: complete company's legal name as filed with the Secretary of State including d/b/a (fictitious name) if applicable. Name of business owner needs to be completed especially if other than applicant.

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Required Documents: ☐ Copy of Company Page from Sunbiz.org ☐ Copy of Annual Report from Sunbiz.org ☐ Copy of Federal Employee Identification Number (FEIN/Tax ID) issued by the IRS
☐ Copy of Fictitious Name (d/b/a if applicable)
3.2. Business Questionnaire: - complete all questions a-g relating to the company you are qualifying. Answers provided will determine which entity you are qualifying and level of supervision.
Required Documents: ☐ Copies of additional construction/trade licenses held in other counties (if applicable) ☐ Proof of ownership (shares certificates, ownership agreements, official minutes etc.)
3.3. Corporation or LLC: - you must list all officers with address and contact information relating to the Corporation or LLC you are qualifying. (if applicable)
Section 4 – Background Questions
Please read questions 1-4 and answer appropriately. Please make sure your answers are truthful and accurate. You must also order a livescan fingerprinting as part of the application process, results must be sent to the office prior to application submittal.
Please refer to Informational/Reference G for a list of providers and instruction.
Required Documents: ☐ Proof of livescan fingerprinting submittal
Section 5 - Explanation Section
If you answered yes to any questions outlined in Section 4, please fill out this section.
Required Documents: ☐ Supporting legal documentation (disposition or sentence, if applicable)
Section 6 - Financial Responsibility & Stability
6.1. Business Worthiness- Please answer questions as to any bankruptcies, unsatisfied judgments or liens against yourself or a previously qualified company.
Required Documents: ☐ Supporting legal documentation (bankruptcy filing, satisfaction of lien, etc., if applicable)

Form CC-08-01 Page **3** of **5** Instructions Rev. 12/9/16

6.2. Credit Reports - Applicants must request a credit report containing a credit score (FICO derived) from a nationally recognized credit report agency, which includes a public records statement that records have been check at local, state and federal levels.

Financial responsibility & stability can be demonstrated by a credit score of 660 or higher.

<u>Credit Reports required are (1) one on the applicant and (1) one on the company.</u> If the company is **less** than 6 months old, then you must request (1) one on the applicant and (1) one on each officer.

Partial List of Nationally Recognized Credit Reporting Agencies (This list is not all-inclusive. Please see disclaimer below)			
Associated Credit Reporting Inc.	1-800-676-7640	Sunrise	
Credit Check, Inc.	1-877-616-5556	West Palm Beach	
Licenses Etc.	239-777-1028	Naples	
Lumbermen's	1-800-496-4826	Ft. Lauderdale	
DOLL TO THE THE PROPERTY OF A THE			

Disclaimer: We cannot recommend or endorse a particular Nationally Recognized Credit Reporting Agency. The list provided above includes agencies in this area that we are aware of that currently meet the Board's reporting requirements. It is provided solely as a courtesy to assist you in locating resources.

You must also order your credit reports as part of the application process, results must be sent to the office prior to application submittal otherwise application will be deemed incomplete.

Required Documents:

□Credit Report o	n Se	elt
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☐Credit Report on Business

□Credit Report on each officer (if applicable)

6.3. Financial Responsibility Course (optional) - Applicant's with a credit score between 580 to 659 may still meet the financial responsibility requirement by obtaining a certificate of completion of an approved 14 hour financial responsibility course from an approved provider. Please complete this section and contact one of the providers on the **Informational/Reference H** for further instruction.

Required Documents:

☐ 14-hr Certificate of Completion included in application (if applicable)

6.4. Form A - Business Financial Form (required) - list the name of company, cash shown from current bank statement (ending balance should be at least 50% of the cash requirement outlined below per trade) and whatever other company fixed assets apply for your company (i.e. truck, equipment, warehouse, etc.).

Sole Proprietorship - if business is to be in applicant's name only (i.e. John Jones), fill in as a personal financial statement.

Form CC-08-01 Page **4** of **5** Instructions Rev. 12/9/16

Net worth Requirement guideline per trade:

General, Building, & Residential \$20,000.00
Carpentry, Demolition, Electrical, HARV, Plumbing, Roofing, Structural Steel, Swimming Pool Construction & Underground Utilities
Marine \$5,000.00
All other Specialty Trades \$22,500.00

Net Worth shall be defined as having a minimum of 50% in cash (half can be in fixed assets and half shown in cash) verified by a <u>current company bank statement</u> or bank letter.

Required Documents:

☐ Copy of current bank statement or bank letter (letter is only acceptable for newly formed companies who have not received a monthly bank statement)

Section 7 - Employment

□Form B - Employment History Form (required) - please begin with the most recent employment and make copies of form as needed; must show the total time of experience for the trade in which you are trying to obtain qualification.

□Form C - Affidavit of Construction Experience (required) – experience must be verified by a licensed contractor who you worked for and signature on form to be notarized. Form must be completed in blue or black ink.

Required Documents:

- □Copy of qualifiers contractor license
- □Copy of qualifiers drivers' license
- □Copies of contracts or supporting documentation of experience (if applicable)

Section 8 - Qualifiers Responsibility

If you the applicant are the only officer in the corporation, please check the box indicated on the application and go to the next section.

If the company has a corporate officer, please have the officer complete the outlined form.

□Form D - Qualifiers Responsibility Affidavit (optional)

Section 9 - Terms & Conditions

This section acknowledges the responsibilities of the qualifier as deemed in Chapter 67-1876 Special Act, and Laws of Florida, as amended. Please read each carefully and acknowledge by checking the box provided.

Section 10 - Declaration of Written Affirmation

Applicant must sign the affirmation by written declaration to complete the application.

Form CC-08-01 Page 5 of 5 Instructions

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Application Forms

- A. Business Financial Form
- B. Employment History Form
- C. Affidavit of Construction Experience Form
- D. Qualifiers Responsibility Form (optional)



Section 6.4 - Business Financial Form

Please fill out in its entirety, accompanied by supporting documentation such as a current bank statement/letter. (letter only acceptable for a newly formed company)

Company Name: company's full legal name INC/CORP/LLC (include d/b/a, if applicable)				
	rrent Assets			
Cash	\$			
Notes Receivable	\$			
Accounts Receivable	\$			
Stocks	\$			
Inventories	\$			
Other Current Assets	\$			
Total Current Assets	\$			
<u>Fi</u>	ixed Assets			
Office Equipment	\$			
Cars, Trucks, & Equipment	\$			
Real Estate	\$			
Total Fixed Assets	\$			
Total Fixed Assets + Current Assets	\$			
	ont Liabilities			
Notes Payable (within 1 year)	<u>rent Liabilities</u> \$			
Accounts Payable	<u>Ψ</u> \$			
Accounts Fayable Accrued Taxes	\$			
Other Current Liabilities	\$			
Total Current Liabilities	\$			
Tomi Sufferings				
	<u> Ferm Liabilities</u>			
Notes Payable (due in more than 1 year)	\$			
Mortgage Payable	\$			
Other Liabilities	\$			
Total Long Term Liabilities \$				
Total Long Term + Current Liabilities	\$			
Net Worth (Total Assets (-) Total Liabilities)				
Total Assets:	\$			
(-) Total Liabilities:	\$			
(=) Company Net Worth	\$			
certify that the information provided on the	e Financial Statement Form is true and correct.			

I

Printed Name:	Date:	Qualifiers Signature:

Form CC-08-07 **Business Financial Form** Rev. 12/9/16



CERTIFICATE OF COMPETENCY APPLICATION $Form \ B$

Section 7- Employment History Form

Employment history provided must demonstrate the appropriate time frames based on the construction trade in which you are applying for, please start with the most recent. Information will be verified. If there is additional employment history, please make copies of this section and complete.

Employer Name:	Dates Employed (mm/yyyy to mm/yyyy)
Employer Address:	Employer Phone Number:
Name of qualifying contractor for employer:	License number of qualifying contractor:
Contact Name:	Role (Check the one that applies) ☐ Worker or ☐ Supervisor
Email:	
Describe job duties:	
Time during duration of employment:	
☐ As a worker ☐	As a supervisor
Note: the time reported needs to equal or exceed the	number of years of experience for the required trade.

Form CC-08-08 Rev. 12/9/16



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Form C

Section 7- Affidavit of Construction Experience Form

Construction Industry Licensing Board of Palm Beach County 2300 N. Jog Road, 2nd Floor Ste. 2W-61, West Palm Beach, FL 33411

Instructions:

- This form is to be filled out in black or blue ink by the contractor under whom work was performed and returned to the address above.
- The Contractor's License and Driver's License must be included.
- Alterations of any kind will void this form.
- Affidavit Forms must be furnished to substantiate the minimum experience requirement in the category for which application is made.

	num experience requirement in the energory for which appreciation is made.		
Name of Applicant:			
Name of qualifier where applicant is still employed or was formerly employed:			
Company Name:			
Business Address:			
Business Phone:	Cell Phone:		
Email:			
Time Employed From: (mm/yyyy)	To: (mm/yyyy)		
During the dates indicated above, our company records specify the above named employee performed in the capacity of:			
Description of job duties performed while employed:			
Total Time Employed with company:(yy/mm)	Total Time in a Supervisory Capacity with company:(yy/mm)		
I attest that I am the qualifier for the above construction	n company and hold or have held a Certificate of Competency and/or		
License #			
Issued By	As aContractor.		
(Print Qualifying Agents Name)	(Signature of Qualifying Agent)		
STATE OF } COUNTY OF }			
· ·	med) before me on (date) name of affiant, respondent or other signer). He/she is personally (type of identification) as identification.		
(NOTARY'S SIGNATURE AND SEAL)			
This form may be duplicated. IF YOU ARE OR WERE SELF-EMPLOYED - verification o	f required experience may be supplied from copies of past and current certificates		

IF YOU ARE OR WERE SELF-EMPLOYED - verification of required experience may be supplied from copies of past and current certificates of competency or license, or original notarized letters from **Building Officials** or **Licensing Agencies**, **plus <u>A and/or B</u> A)** copies of fully executed contracts (such as invoices with supporting documents ex: 1099, tax returns, etc.) - one per month covering the **required time period**, **OR if possible**, **B**) notarized letters from contractors you performed work for as a subcontractor (listing the time frame for each of the jobs and description of work involved)

Please Note: All information reported in the above affidavit will be verified by our office.



Form D

Section 8 - Qualifiers Responsibility Affidavit Form (Optional)

I hereby certify that(Qua	alifier's legal name, ex: John Smith)	is the qualifying agent for
(company's full legal name INC/CORP/LLC - include d/b/a if applicable)		
Located at		
	(Address)	
City	State	Zip
and, that he/she has the authority to act for the firm or corporation in all matters connected with our contracting business. To take the qualifying examination, to qualify the company and will supervise the construction or installation contracted for, under the Certificate of Competency issued.		
I further certify that <u>I</u> will immediately notify <u>The Construction Industry Licensing Board of Palm Beach County</u> , if the above named qualifying agent shall sever connections with the firm or is no longer actively supervising the construction or installation of work under contract. As outlined in Section 2(O) and 6 (C) of the Special Act, Laws of Florida as amended.		
Signature of Corporate Officer (if other than the applicant who is qualifying the corporation) Date		
STATE OF } COUNTY OF }		
Subscribed and sworn to (or affirmed) bef	fore me on (date)	
By	(name of affiant, respondent or oth	ner signer). He/she is personally known to
me or has presented	(type of identificati	ion) as identification.
(NOTARY'S SIGNATURE AND SEAL	 	

Form CC-08-10 Rev. 12/9/16



Informational References

- E. Exam requirements
- F. Trade experience requisites
- G. Background check requirement/providers
- H. 14 Hour Financial Responsibility requirement/providers
- I. Construction Industry Licensing Board(CILB) meeting schedule



Contractors Certification Division Planning, Zoning & Building 2300 N. Jog Road, 2nd Floor Suite 2W-61 West Palm Beach, FL 33411 Office (561) 233-5525 Fax (561) 233-5554

Email: <u>PZBCCERT@pbcgov.org</u>
Website: <u>www.pbcgov.org/pzb/contractors</u>

Exam Information for Contractors Certification Licenses

Requirements:

- 1. Contractors are required to take a Business and Law exam as well as a Construction Trade exam.
- 2. Journeymen and/or Technicians are required to take only the Trade Exam.
- 3. Exams may be taken <u>prior to or after</u> the Construction Industry Licensing Board (CILB) approves your Contractors Certification application.

Please note the following:

- All examinations must be taken in Palm Beach County.
- A passing grade of 75% must be achieved on each exam.
- You must have the testing agency(s) notify our office of your passing test scores.
- You must select your testing agency from the approved list below. Please contact the individual testing agency for exam schedules and arrangements.
- Once you file a Contractors Certification application and it is approved by the CILB:
 - O You must take the exam in Palm Beach County within 60 days of approval by the CILB. A maximum of 4 exams in a category may be taken in 12-month period, but, exams may not be re-scheduled until 60 days have elapsed between exams taken.
 - O You must achieve a passing grade of 75% must be achieved on each exam.
 - O You must have the testing agency(s) notify our office of <u>all</u> your test results, pass or fail.
 - You will have thirteen (13) months from the date of approval to meet the remaining licensing requirements. Thereafter, the application becomes null and void.

Where to take the exam:

Select and contact directly, one of the following CILB approved testing agencies to make arrangements for taking your exam and obtaining study guides. You must inform the testing company of your need to report the results of your exam to our office each time you take the exam

GITS

Tel. # (800) 997-2129

 $\textit{Email: } \underline{\textit{gitsllc@gitsllc.net}}$

Website: www.gitsllc.org

PROV:

Tel. # (866) 720-7768

Email: <u>Lourdes@provexam.com</u>
Website: http://www.provexam.com

Exam tips:

Please note the most common reasons for failing an exam are:

- *Not preparing for the exam*
- *Underestimating what will be tested on the exam*
- Not knowing the technical terms as opposed to the common terms in your trade
- *Not answering all the questions*

Please contact our office should you have any questions regarding the examination process.



Section 1.2 - Type of Application (Classification /Trade)



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TRADE REQUISITES

Pursuant to Chapter 67-1876, Special Act as amended, Laws of Florida it is required that a Certificate of Competency be held in order to advertise, bid, maintain or contract any work in the following Construction Trades:

(experience must be shown by documented proof). For further specification on the different trades refer to the <u>Standard for</u> <u>Certified Categories</u>

Trade	Hands on Experience Required for Licensure
General Contractor	5 Years Supervisory Capacity
Building Contractor	4 Years Supervisory Capacity
Residential Contractor	3 Years Supervisory Capacity
Electrical Contractor	7 Years Experience, 4 of which shall be as a Journeyman in a
Electrical Collidation	Supervisory Capacity.
Plumbing Contractor	7 Years Experience, 4 of which shall be as a Journeyman in a
Trumoning Contractor	Supervisory Capacity.
HARV (Heating, A/C, Refrigeration & Ventilation)	7 Years Supervisory Capacity
Contractor	/ Tears Supervisory Capacity
	2 V F i i 1 1 1/2 i C i i C i i C i i C i i C i i C i i C i i C i i C i i C i
Specialty Contractor (43 Trades)	3 Years Experience with 1-1/2 years in a Supervisory Capacity
	require licensure in Palm Beach County
Acoustical/Suspended Ceiling Contractor	Marine Contractor
Aluminum Specialties Contractor	Masonry Contractor
Carpentry Contractor	Painting Contractor
Carpentry – Finish Contractor	Paver Brick/Paver Systems Contractor
Concrete Forming & Placing Contractor	Paving Contractor
Countertop Contractor	Plastering Contractor
Decorative Metal Contractor	Reinforced Steel Contractor
Demolition Contractor	Re-Screener/Screen Repair Contractor
Dredging and Land Filling Contractor	Roofing Contractor
Drywall Contractor	Seal Coating/Striping Contractor
Fabric Awnings Contractor	Sign Contractor -Electrical
Fence Contractor	Sign Contractor –Non-Electrical
Garage Doors Contractor	Structural Steel Erection Contractor
Glass and Glazing Contractor	Swimming Pool Construction Contractor
Gunite Contractor	Swimming Pool Maintenance and Repair Contractor
Hurricane Shutter/Awning Contractor	Tennis Court Contractor
Insulation Contractor	Tile, Terrazzo and Stone Contractor
Irrigation Sprinkler Contractor	Underground/Overhead Transmission Lines Contractor
Lightning Protection Systems Contractor	Underground Utilities Contractor
Low Voltage Contractor	Window and Door Contractor
	Wood Flooring Contractor

*Journeyman Electrician		
(4-year apprenticeship program)		

Completion Certificate from a <u>registered 4 year Apprenticeship Program</u> which includes 4 years of work experience <u>OR</u> completion of 2 years in registered apprenticeship program, which includes 2 years work experience and additional 3 years practical work experience under the direct supervision of a certified or licensed contractor <u>OR</u> 6 years practical work experience under the direct supervision of a Certified Electrical Contractor.

*Journeyman Plumber (3-year apprenticeship program)

Completion Certificate from a <u>registered 3 year Apprenticeship Program</u>, which includes 3 years work experience <u>OR</u> 4 years of full time practical work experience under the direct supervision of a Certified Plumbing Contractor.

^{*} Works under direct supervision of a Certified Contractor.



Contractors Certification Division Planning, Zoning & Building 2300 N. Jog Road, 2nd Floor Suite 2W-61 West Palm Beach, FL 33411 Office (561) 233-5525 Fax (561) 233-5554

Email: <u>PZBCCERT@pbcgov.org</u>
Website: <u>www.pbcgov.org/pzb/contractors</u>

Background Fingerprint Service Providers

Dear Applicant, as of 10/1/2015, the Construction Industry Licensing Board (CILB) has implemented a new ruling to perform livescan fingerprints. You must obtain fingerprints to comply with the application requiring a criminal background check on all applicants.

Below is the Florida Department of Law Enforcement (FDLE) website which you may use to locate a livescan fingerprinting provider:

http://www.fdle.state.fl.us/Criminal-History-Records/Documents/ApplicantLivescanService-ProvidersVendors.aspx

The approved Livescan Providers link is maintained by the Florida Department of Business and Professional Regulation (DBPR).

- You may also check with your local law enforcement agencies, such as police departments and sheriff's offices to see if they provide livescan fingerprinting.
- The Palm Beach County Identifier (ORI Number) is **FL750157Z**. This number must be given to the fingerprinting provider in order for Contractors Certification to receive the results. Confirm with the Provider, *prior to selection*, that they can process your fingerprints using our ORI number.
- Contractors Certification must receive the fingerprint results prior to your application being reviewed. *Please feel free to provide a copy of this document to the Fingerprint Provider.*

CILB Rule #7 Criminal Record:

(A.) <u>Criminal Background Checks</u>: are to demonstrate that the applicant is of good moral character and is fit for licensure, the applicant must submit to a Level 2 criminal background check conducted by the Florida Department of Law Enforcement and the Federal Bureau of Investigation. The cost of the criminal background check is to be covered by the applicant.

If the applicant is found to have a criminal background, the Board may deny issuance of a certificate of competency based upon:

- (1.) the relationship of the crime to contracting;
- (2.) the severity of the crime; or
- (3.) the potential for public harm.

However, the Board may consider as mitigating factors:

- (1.) the length of time since the commission of the crime; and
- (2.) evidence of rehabilitation of the applicant.

The Board may not deny licensure to an applicant based solely upon a conviction or the applicant's failure to provide proof of restoration of civil rights. In determining the issuance of a re-certification, the Board may require the licensed contractor to submit to a criminal background check.



Financial Responsibility & Stability

Dear Applicant, as of 10/1/2015, the Construction Industry Licensing Board (CILB) has implemented a new ruling to obtain credit score criteria as part of the application process. You must submit a credit report (FICO derived) from a nationally recognized credit report agency, which includes a public records statement that records have been check at local, state and federal levels.

You must meet a credit score of 660 or higher in order for your application to be considered. Applicants with a credit score between 580 to 659 have two (2) options; (1) submit application once a credit score of 660 is obtained, or (2) pass a Florida CILB approved 14-hour financial responsibility course. Should you choose option (2) you must contact an approved financial responsibility course entity by going to the web link listed below.

Approved 14-hour Financial Responsibility Courses link:

http://www.myfloridalicense.com/dbpr/servop/testing/documents/cilb_ce_prov.pdf

The approved Financial Responsibility Courses link is maintained by the Florida Department of Business and Professional Regulation (DBPR).

• Contractors Certification must receive the Certificate of Completion with your application for review.

CILB Rule #6: Credit Reputation

B. <u>Credit Scores</u>: Applicants with a credit score of 660 or higher meet the minimum credit reputation requirements for licensure. Applicants with a credit score between 580 to 659, must pass a Florida CILB approved 14-hour financial responsibility course and provide certification at time of application to meet credit reputation requirements for licensure; failure to do so will render the application incomplete. Applicants with a credit score below 580 or with no credit history do not meet the minimum credit reputation requirements for licensure and the application will be administratively denied by the Director. Unless otherwise prohibited by these Rules or the Special Act, the applicant may apply for licensure to the CILB again once the credit score is 580 or above.



CONSTRUCTION INDUSTRY LICENSING BOARD of PALM BEACH COUNTY

2018 BOARD MEETING SCHEDULE

The following are deadlines for submitting a completed application to obtain licensure:

<u>DEADLINE DATE</u>	BOARD MEETING DATE	
January 5, 2019	Innuary 20, 2019	
January 5, 2018	January 29, 2018	
February 2, 2018	February 26, 2018	
March 2, 2018	March 26, 2018	
April 6, 2018	April 23, 2018	
May 4, 2018	May 21, 2018	
June 1, 2018	June 25, 2018	
July 6, 2018	July 23, 2018	
August 3, 2018	August 27, 2018	
September 7, 2018	September 24, 2018	
October 5, 2018	October 22, 2018	
**November 2018 – No Meeting Scheduled		
November 9, 2018	December 17, 2018	

- The CILB meets once a month on the 4th Monday, scheduling and holidays permitting, with the exception of November when no meeting is held.
- Application must be completed and submitted by the 1st Friday of the month to be considered for the agenda of that months Board meeting.
- The Construction Industry Licensing Board (CILB) of Palm Beach County meets at the Vista Center, 2300 North Jog Road, West Palm Beach, at 2:00 p.m., in Conference Room 1W-47. For further inquiries you can contact our office at (561) 233-5525 or via our email address at PZBCCert@pbcgov.org