

BUILDING CODE SERVICES CONTRACTOR REGISTRATION

Note: No fee is required to register with the City of Weston Building Code Services.

CONTRACTOR INFORMATION

TYPE OF CONTRACTOR:			
COMPANY NAME:			
PHONE:	FAX:	EMAIL:	
QUALIFIER INFORMATION			
NAME OF QUALIFIER:			
PHONE:	FAX:	EMAIL:	
policy and procedure updates and office DOCUMENTATION – Copies of the fo State Certification -OR- State Receipt Business Tax Receipt General Liability: "City of Wester Workman's Compensation / Exercises."	llowing are required for gistration AND Browar on as Certificate Holde	d County Certificate of Compete	ency
QUALIFIER SIGNATURE:		DATE:	
STATE OF FLORIDA/COUNTY OF BRO Sworn to (or affirmed) and subscribed b by		day of , 20 ,	
	Notary's Sign	ature	
	Print Name o	f Notary Public	
Personally known OR Produced Identification Type of Identification Produced			