



Application for a Certificate of Competency

Thank you for your interest in applying for a Certificate of Competency. This application is for an applicant that is applying by Examination or via County Reciprocity within Florida; the fee for application is \$450.00. This application package includes the following:

- Application - Sections 1 thru 9 (pages 1-7)
- Step by Step Application Instructions (pages 1-8)
- Required Forms
 1. *Corporate Officer Affidavit (Optional)*
 2. *Financial Statement*
 3. *Applicants Employment History*
 4. *Affidavit of Construction Experience*
- Informational References
 1. *Examination Information for Contractors Certification Licenses*
 2. *Classification & Construction Trade Requirements*
 3. *Background Fingerprint Service Providers*
 4. *Financial Responsibility & Stability (Optional)*

CONSTRUCTION INDUSTRY LICENSING BOARD OF PALM BEACH COUNTY

(Contractors Certification Division –PZ&B)

2300 N Jog Road, 2nd Floor, Suite 2W-61,

West Palm Beach, FL 33411

Phone: (561) 233-5525



CERTIFICATE OF COMPETENCY APPLICATION

2.1 Photograph
(Attach photo in this area)

Received Date <i>(Office Use Only)</i>

Application Number: <i>(Office Use Only)</i>	
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Please type or print all information clearly; complete all sections of the application in its entirety in blue or black ink. Anything that does not apply fill in with N/A. Additional information for each section outlined in the step-by-step application instructions.

Section 1 – Application Information	
1.1 Application Type (Check One): <input type="checkbox"/> a) by Examination or <input type="checkbox"/> b) by Reciprocity from _____ County	
1.2 Classification / Trade (Check One): <input type="checkbox"/> a) General <input type="checkbox"/> b) Building <input type="checkbox"/> c) Residential <input type="checkbox"/> d) Electrical <input type="checkbox"/> e) Plumbing <input type="checkbox"/> f) HARV or <input type="checkbox"/> g) Specialty (specify trade): _____	
1.3 Certificate Status: Certificate to be issued: <input type="checkbox"/> Active or <input type="checkbox"/> Inactive	

Section 2 – Personal Information		
2.2 Full Legal Name		
First:	Middle:	Last:
Birth Date: (mm/dd/yyyy)		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
2.3 Citizenship Status		
U.S. Social Security #:	Driver's License #:	Issuing State:
Place of Birth:		
Citizen of the United States? (if no, provide documentation as to residency status) <input type="checkbox"/> Yes <input type="checkbox"/> No		



CERTIFICATE OF COMPETENCY APPLICATION

2.4 Residential Address		
Street Address: (No PO Box)		
City:	State:	Zip code:
2.5 Contact Information		
Primary Phone Number:		
Primary E-mail address:		

Section 3 – Business Information			
3.1 Company Information			
Company's Full Legal Name: INC/CORP/LLC			
d/b/a (if applicable):			
Business Address: (No PO Box)		Suite:	Business Phone:
City:	State:	Zip Code:	Business Fax:
Date Company Established:		Federal Employee Identification Number:(FEIN)	
3.2 Business Questionnaire			
a.	I am qualifying for a (choose one): <input type="checkbox"/> Partnership/Corporation or LLC <input type="checkbox"/> Sole Proprietorship		
b.	Will you be supervising employees of this company (choose one): <input type="checkbox"/> Yes (c) <input type="checkbox"/> No (d)		
c.	If yes, please provide the number of employees and their duties. <hr/> <hr/>		
d.	If No, please explain: <hr/> <hr/>		



CERTIFICATE OF COMPETENCY APPLICATION

e. Please describe your supervision duty under your trade, only if you answered yes on 3.2 (c):

3.3 Current Construction Licenses (copies required, if you answered 1.2 g)

1. License #:	County/State:	Date Issued: (M/Y)
2. License #:	County/State:	Date Issued: (M/Y)
3. License #:	County/State:	Date Issued: (M/Y)
4. License #:	County/State:	Date Issued: (M/Y)

3.4 Complete this section if you are qualifying a Corporation or an LLC:

Title (ex.Pres)	Officer or Member Name	Home Address, City, State, Zip	Contact number

3.5 Corporate Officer Affidavit Form (Optional)

Complete form if you have filled out section 3.4 with information other than the applicants.

(Intentionally left blank)



CERTIFICATE OF COMPETENCY APPLICATION

Section 4 –Criminal Background	
4.1 Have you applied for you live scan fingerprints?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2 Have you ever been convicted or found guilty of, or entered a plea of guilty or <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, county, state, or federal including felony, misdemeanor and traffic offenses (but not to include parking, speeding, inspection, or traffic signal violations) without regard to whether you were placed on probation, had adjudication withheld, were paroled, or pardoned. 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.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.4 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.5 Have you ever been issued a Notice of Non-Compliance, Notice of Violation, a Citation, or received any disciplinary action, construction related (including a fine(s) or reprimand) by any State, County or Municipal Authority?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 5- Explanation Section Background Summary (Only if applicable)	
Offense:	
County:	State:
Penalty/(Disposition/Sentence):	
Date of Offense: (mm/dd/yyyy)	Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
Explanation:	



CERTIFICATE OF COMPETENCY APPLICATION

Section 6–Financial Responsibility & Stability	
6.1 Business Worthiness	
<p>Are there any pending bankruptcies, unsatisfied judgements, lawsuits or liens against a business you previously qualified, which were filed during your period of qualification or the business you are applying to qualify?</p> <p>This question applies to any unpaid judgements, lawsuits or liens, including those for unpaid past due bills by creditors, construction and non-construction issues and tax liens.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If you answered yes to the above question, please complete section below, explain in detail, and include any supporting legal documents. If necessary, include explanation on a separate sheet.</p>	
Type of Event:	
County:	State:
Date of Event: (mm/dd/yyyy)	Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
Explanation:	
6.2 Credit Reports/Credit Score	
Have you applied for your credit reports?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the submitted credit report show a credit score of 660 or higher? (If no, please follow instructions and complete Section 6.3)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.3 Financial Responsibility Course (Optional for applicants with scores below 660)	
Have you completed a 14- hour financial responsibility course?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.4 Financial Statement (Required Form)	
Section 7 –Employment /Trade Experience	
7.1 Applicant Employment History (Required Form)	
7.2 Affidavit of Construction Experience (Required Form)	
Section 8- Qualifiers Responsibility (Terms & Conditions)	
<p>8.1 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</p>	
<p>8.2 I understand that if my application is denied because I do not meet the application criteria, I forfeit the application review fee.</p>	
<p>8.3 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.(Rule #1E)</p>	



CERTIFICATE OF COMPETENCY APPLICATION

8.4 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 complete. (Rule #1D)

8.5 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. (Rule #1F)

8.6 I understand that the business name shall not be misleading as to the scope of certification held.

8.7 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.

8.8 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.

8.9 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.

8.10 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.

8.11 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.

8.12 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.

8.13 Falsification of any information herein, including all supplemental pages and attachments, are 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 and the applicant shall not be allowed to submit a new application for 12 months. (Rule #1C).

8.14 I have read and fully understand all the terms and conditions 1 through 13 outlined and referenced in Section 8.

I am acknowledging the information and am in agreement with the outlined terms and conditions in compliance with Chapter 67-1876 Special Act, Laws of Florida, as amended, and Rules and Regulations for Palm Beach County.

_____Applicants Initials



CERTIFICATE OF COMPETENCY APPLICATION

Section 9 - 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

(Intentionally left blank)



*Certificate of Competency Application
Step-by-Step Instructions*

STEP-BY-STEP CERTIFICATE OF COMPETENCY APPLICATION INSTRUCTIONS

Thank you for your interest in becoming a County Certified Contractor. This application is for an applicant filing via examination or reciprocity within the State of Florida.

Please type or print all information clearly in blue or black ink; complete all sections pages 1 through 7 of the application in its entirety, place an N/A in sections that do not apply. Application is also available via website in fillable form.

Follow Step-by-Step instruction per section, any information that is omitted or incomplete may delay your certification process. Application is to be returned with required forms and documents.

➤ **Application Fee \$450.00:**

The total application fee of the license you are applying for is \$450.00. Once an application is received in the office, information will be input into the system creating a tracking number (ex. CC-2019-xxx). You will receive a confirmation email that payment is due in the amount of \$225.00 to commence the review process. Reviews are processed in the order they are received.

Payment is accepted in the form of credit card via online payment by visiting <http://discover.pbcgov.org/pzb/contractors> clicking the *I Want To* link and then clicking the link titled *Pay Fees Online*.

or you may visit the cashier to pay in cash or check in person at Planning, Zoning and Building - 2300 N. Jog Rd, 1st Floor Cashier Booth, Room 1E-14, West Palm Beach, FL 33411.

If you would like to mail the payment, please include your application number on the check or money order and mail to Planning, Zoning and Building, **c/o Accounting** at 2300 N. Jog Rd, West Palm Beach, FL 33411

Make sure to reference the CC number assigned to your application on any form of payment or correspondence.

Section 1- Application Information

1.1 Application Type- Please explain the type of application for which you are applying

a) **Examination:**

An applicant can take the exam prior to filing an application or after application has been Board approved. There are two approved providers, please refer to the reference for their contact information.

- Please refer to exam requirements and testing agencies contact information under informational reference **Exam Information for Contractors Certification Licenses.**

CERTIFICATE OF COMPETENCY INSTRUCTIONS

- b) **Reciprocity:** Please indicate which County sponsored your license (ex. Broward, Collier, Hillsborough etc.)

To apply by Reciprocity within the State of Florida, you must meet the following :

- (1) Trade experience must be equal or greater than the required trade experience for Palm Beach County. Please refer to informational reference **Classification & Construction Trade Requirements**
- (2) Examination results in the originating jurisdiction must have been based on a minimum score of 75 % on both the Trade test and Business and Law test;
- (3) The scope of work must be equal to or substantially similar the Palm Beach County Standard with little or no variation as determined by the Director; and
- (4) Currently licensed in the jurisdiction from which reciprocity is being requested.
- (5) If the trade does not meet the Standard criteria for Palm Beach County, then you may have to re-exam in order to obtain license in this county.

1.2 Classification /Trade:

Choose the type of license for which you are applying by checking off the corresponding box or writing in the Specialty Trade. **#Classification & Construction Trade Requirements**

(a-f) are specified please check the box that applies

(g), Please type the Specialty license that you are applying for.

1.3 Certificate Status:

Please indicate how the license is to be issued, Active Status or an Inactive Status.

- An inactive status means you are licensed but not actively engaged in the trade and cannot contract.
- To activate an inactive license, a Change of Status Application must be completed and submitted for Board approval.

Section 2 – Personal Information

2.1 Photograph:

Please attach a 2”x 2” full-face color passport size photo. The license issued by this office will include this picture. Background for photograph must be white.

2.2 Full Legal Name

Please complete by providing your full legal name; 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 Citizenship Status:

In this section, complete each area with the social security number, driver’s license information, state that issued your driver’s license, place of birth (name of city and/or State or Country) and citizenship. **Copies Required.**

CERTIFICATE OF COMPETENCY INSTRUCTIONS

Disclaimer:

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 STATUTES, 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.

2.5 Contact Information:

Please list a primary contact telephone number for the applicant and a primary e-mail. E-mails are now a mandatory field and will be used to create your online portal account.

link: <https://www.pbcgov.org/ePZB.Admin.WebSPA/>

Section 3- Business Information

3.1 Company Information:

Complete company's legal name as filed with the Secretary of State including "Doing Business As" d/b/a (fictitious name) if applicable. Keep in mind that the business name must not be misleading to trade applying for.

3.2 Business Questionnaire:

Complete company's legal name as filed with the Secretary of State including "Doing Business As" d/b/a (fictitious name) if applicable. Sole proprietors will need to complete the name in which the license is to be issued and complete the d/b/a if applicable. Keep in mind that the business name must not be misleading or for a trade in which you are not licensed.

3.3 Current Construction Licenses: (for Reciprocity)

Please list all currently held construction license information, County where it was issued (State only if reciprocating grades from a State of Florida issued license), date of issuance. Copies Required.

3.4 Corporation or LLC:

Please list all officers as listed on Sunbiz and include title held, name, address and phone numbers. (if applicable)

3.5 Corporate Officer Affidavit (Optional Form, if applicable)

This form is required if there is(are) a corporate officer(s) involved in the company as outlined in section 3.4 other than the applicant. If there is more than one officer listed in section 3.4, please choose one to complete the form. Make sure the additional form is notarized.

Section 4- Criminal Background

4.1 Applicant is required to provide a Livescan Fingerprint, please make sure you file for your criminal background check prior to submitting an application. please refer to the additional informational reference - ***Background Fingerprint Service Providers***

4.2 Please answer question accordingly to anything that may show up on the background report.

CERTIFICATE OF COMPETENCY INSTRUCTIONS

- 4.3 Please answer question accordingly if you have ever had any construction license denied at a Federal, State, County, or Municipal level.
- 4.4 Please answer question accordingly if you have ever had a license revoked, annulled, suspended, relinquished surrendered or disciplined.
- 4.5 Please answer question accordingly to any notice of noncompliance, notice of violation, citation or disciplinary action received that is construction related.

Section 5- Explanation Section

If you answered **yes** to any questions outlined in Section 4, please fill out this section. If there are multiple offenses that need explanation, please include on an additional sheet of paper. Make sure you include any supporting documents.

Section 6- Financial Responsibility

6.1 Business Worthiness:

Please answer accordingly as to questions related to any bankruptcies, lawsuits, unsatisfied judgments or liens against the company you are to qualify or a company previously qualified.

6.2 Credit Reports/Credit Score:

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.

Credit reports that are obtained from an internet site and/or are self-generated will not be accepted. (ex. Experian/Equifax/TransUnion).

The ordering of the credit reports is a required part of the application process; the results must be sent to the office prior to application submittal; reports are valid for **90 days** only. Financial responsibility & stability can be demonstrated by an obtained (FICO) credit score of 660 or higher.

Credit Reports required are (1) one on the applicant and (1) one on the company. 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
<i>Disclaimer:</i> 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.		

CERTIFICATE OF COMPETENCY INSTRUCTIONS

6.3 **Financial Responsibility Course (Optional)**

Applicants with a FICO 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 #Financial Responsibility & Stability Providers for further instruction.

6.4 **Financial Statement (Required Form)**

To demonstrate the ability to run your business, you will be required to list the current assets, fixed assets, current liabilities, and long-term liabilities to determine the net worth of your business you are qualifying. The applicant is to list the name of the company including a d/b/a if applicable.

A Sole Proprietor (Individual)

If business is to be in the applicant's name only (ex. John Jones) or a fictitious name (d/b/a), fill in as a personal financial statement.

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	\$10,000.00
Marine	\$5,000.00
All other Specialty Trades	\$2,500.00

Net Worth is determined by trade as shown above and shall be defined as having a minimum of 50% in cash at the ending balance of the bank statement, the other 50% can be shown in fixed assets. Include a current company bank statement or bank letter (if applicable, bank letter is for a newly established business not yet having been issued a statement.)

Section 7- Employment / Trade Experience

For the trade experience, you are required to show the time that you have been employed and/or how you obtained your construction experience. Below are two required forms that must accompany your documentation and application submittal

7.1 **Applicant's Employment History - Required Form**

This form is to be completed by the applicant to demonstrate the number of years employed in the trade in which you are applying to become licensed whether it is a first time license or applying via Reciprocity. Please begin with your most recent employment and list accordingly; the Applicant's Employment History Form will show a chronological period for all current and past employments as it would on a resume. Make additional copies of form as needed for each employment. Fill out the time spent as an employee at each job and time spent in a supervisory capacity, include in detail your job duties and responsibilities at each employment.

- If applying via reciprocity you may still need to meet the licensing requirements for Palm Beach County.
- Refer to Classification & Construction Trade Requirements informational reference for the timeframe required to apply for your certification.

CERTIFICATE OF COMPETENCY INSTRUCTIONS

7.2 Affidavit of Construction Experience – Required Form

This form is to be completed by the licensed contractor who you worked for to demonstrate the number of years of “hands on experience” in the trade in which you are applying to become licensed. A licensed contractor must verify “General, Building and Residential” applicants’ experience.

Form must be completed in blue or black ink. Please have the current or any past contractor whom you were employed by fill out and complete form. Form must be accompanied by the contractor’s state or county license and his/her driver’s license, signature and notarization required. Alterations to a notarized form will not be accepted. Refer to informational reference **Classification & Construction Trade Requirements** for the years necessary in the trade of application.

Rules and Regulations

3. Experience:

- (A.) Documented experience required to qualify for certification as a contractor or journeyman is defined as "hands-on" field experience and/or supervision in the field. Work experience must be documented by way of contracts, employment affidavits, letters from building officials, architects or engineers who supervised the applicant verifying time worked and describing work performed. (Rev. 1/22/01, 5/23/16)
- (B.) International hands on experience will not be considered. (Eff. 5/23/16)
- (C.) Experienced obtained under a technical certification is not acceptable to apply for a contractor or journeyman certificate of competency. (Eff. 6/17)

Special Act Chapter 67-1876

Section 5. Certification. --

(A) To obtain a certificate of competency an applicant shall submit a complete application in writing to the Board containing the statement that the applicant desires the issuance of a certificate and the class of certificate desired on a form containing the information prescribed by the Board. All applicants must be of good moral character and 18 years of age or older.

(B) The application shall contain the following:

(1) Evidence in the form of affidavits from former employers, building officials, school officials, or other persons to verify the required experience and education.

- Self-Employment (Affidavit form, cannot be filled out for yourself if self-employed) If you are or were self-employed below is an example of how you can demonstrate hands on experience in the trade.

Example: Paid and/or customer signed invoices of work performed. One per month for 36 months for Specialty licenses.

Please note:

W-2 Tax returns and 1099 may be requested to substantiate any of the above documentation but do not show trade or timeframe required.

CERTIFICATE OF COMPETENCY INSTRUCTIONS

Section 8- Qualifiers Responsibility (Terms & Conditions)

This section acknowledges the responsibilities of the qualifier as deemed in Chapter 67-1876 Special Act, and Laws of Florida, as amended and Rules and Regulations for Palm Beach County Contractors. Please read each carefully numbered 1-13 and acknowledge by checking the box provided and initialing electronically.

Section 9- Declaration of Written Affirmation

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

- Once application is complete upon the sufficiency review, you will be notified by email as to final payment and scheduling of a CILB meeting. It is required that the applicant be present the day the Board reviews their application should any additional information need to be provided via sworn testimony.

Checklist for application submittal

The following documents must be furnished upon submittal of your application for review, any missing or omitted documentation will further delay the process for approval.

Section 1

- Examination results, if you have taken the exam prior to applying make sure results have been provided to the office via e-mail from the exam provider.
- Reciprocal letter requested and mailed to the office by the Sponsoring County
- Copy of Scope/Standard from the county that is sponsoring your reciprocity.

Section 2

- Photograph attached
- Copy of applicant’s driver’s license
- Copy of signed social security card
- Copy of resident alien card, working visa documents, etc. (if applicable)

Section 3

- Copy of company page from Sunbiz.org, will show when company was established
- Copy of annual report from Sunbiz.org, will show if company is current
- Copy of federal employee identification number issued to the company by the IRS
- Copy of fictitious name registration from Sunbiz.org (if applicable)
- Copies of current construction trade issued licenses
- Corporate Officer Affidavit Form (if applicable)

Section 4

- make sure you have applied for your livescan fingerprints and results have been sent to the office.

CERTIFICATE OF COMPETENCY INSTRUCTIONS

Section 5 (if applicable)

- supporting legal documentation.

Section 6

- supporting legal documents as to bankruptcy filing, satisfactions of liens, etc. (if applicable)
- Credit report on applicant
- Credit report on business
- Credit report on each corporate officer (if applicable)
- 14 hour financial responsibility course certificate of completion for credit scores 580-659 (if applicable)
- *Financial Statement*

Section 7

- *Applicant's Employment History Forms*
- *Affidavit of Construction Experience Form*
 - Copy of qualifiers contractor license (State or County) for affidavit
 - Copy of qualifiers drivers' license for affidavit
- Self Employed: copies of fully executed contracts, paid and/or customer signed invoices, 1 per month to meet required number of years in trade for Specialty licenses.



*Certificate of Competency Application
Required Forms*

- 1. Corporate Officer Affidavit (optional)*
- 2. Financial Statement*
- 3. Applicant's Employment History*
- 4. Affidavit of Construction Experience*



Corporate Officer Affidavit (Optional)

This form is for when there is a corporate officer involved in the company as outlined in section 3.3 of the application other than the applicant.

Name of Applicant:
Name of Corporate Officer:
Full Company Name:

I, (corporate officer) _____ hereby do certify that
 (applicant) _____ will be the qualifying agent
 for (company name) _____
 at (company address) _____
 City _____ State _____ Zip _____

In addition, 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 I, as the corporate officer, am responsible for immediately notifying the Construction Industry Licensing Board of Palm Beach County, 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 **Date**

STATE OF } _____
COUNTY OF } _____

Subscribed and sworn to (or affirmed) before me on (date) _____

By (name of corporate officer) _____. He/she is personally known to me or has presented _____ (type of identification) as identification.

 (**NOTARY'S SIGNATURE AND SEAL**)



Financial Statement

- Please complete all sections; look at step-by-step instructions as to requirements. Make sure to include the most current company bank statement or bank letter (if applicable).

Partnership / Corporation or LLC

Sole Proprietor

Applicant Name:
Company's Full Legal Name: INC/CORP/LLC (include d/b/a if applicable)

Section 1- Current Assets

Cash (ending bank statement balance)	\$ _____
Notes Receivable	\$ _____
Accounts Receivable	\$ _____
Stocks	\$ _____
Inventories	\$ _____
Total Current Assets	\$ _____

Section 2- Fixed Assets

Office Equipment	\$ _____
Cars, Trucks, & Equipment	\$ _____
Real Estate (company owned for a business)	\$ _____
Total Fixed Assets	\$ _____

Current Assets (1) + Total Fixed (2) Assets = A. \$

Section 3- Current Liabilities

Notes Payable (within 1 year)	\$ _____
Accounts Payable	\$ _____
Accrued Taxes	\$ _____
Total Current Liabilities	\$ _____

Section 4- Long Term Liabilities

Notes Payable (due in more than 1 year)	\$ _____
Mortgage Payable	\$ _____
Other Liabilities	\$ _____
Total Long Term Liabilities	\$ _____

Current Liabilities (3) + Total Long Term (4) Liabilities = B. \$

Section 5- Net Worth

+ A. Total Assets:	\$ _____
- B. Total Liabilities:	\$ _____
= C. <i>Company Net Worth must equal the Trade requirement</i>	C. \$

I certify that the information provided on this *Financial Statement* is true and correct.

Printed Name:	Date:	Qualifiers Signature:
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Affidavit of Construction Experience

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.

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 relevant to the licensed applied as:

Description "hands on" 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 company and hold or have held a Certificate of Competency and/or License # _____

Issued By _____ As a _____ Contractor.

(Print Qualifying Agents Name)

(Signature of Qualifying Agent)

STATE OF } _____
COUNTY OF } _____

Subscribed and sworn to (or affirmed) before me on _____ (date) by _____ (name of contractor). He/She is personally known to me or has presented _____ (type of identification) as identification.

(NOTARY'S SIGNATURE AND SEAL)

This form may be duplicated.

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



Certificate of Competency Application

Informational References

- 1. Exam Information for Contractors Certification Licenses*
- 2. Classification & Construction Trade Requirements*
- 3. Background Fingerprint Service Providers*
- 4. Financial Responsibility & Stability (Optional)*



Contractors Certification Division
Planning, Zoning & Building
2300 N. Jog Road, 2nd Floor Suite 2W-61
West Palm Beach, FL 33411
Office (561) 233-5525
Email: PZBCCERT@pbcgov.org
Website: www.pbcgov.org/pzb/contractors

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 prior to or after 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:**
 - 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.
 - You must achieve a passing grade of 75% must be achieved on each exam.
 - You must have the testing agency(s) notify our office of all 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 Email: gitsllc@gitsllc.net Website: www.gitsllc.org	PROV: Tel. # (866) 720-7768 Email: Lourdes@provexam.com Website: http://www.provexam.com
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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.



Classifications & Construction Trade Requirements

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 49 different trades refer to the [Standard for Certified Categories](#)

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 Supervisory Capacity.
Plumbing Contractor	7 Years Experience, 4 of which shall be as a Journeyman in a Supervisory Capacity.
HARV (Heating, A/C, Refrigeration & Ventilation) Contractor	7 Years Supervisory Capacity
Specialty Contractor	3 Years Experience with 1-1/2 years in a Supervisory Capacity
*Specialty Trades that 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 **registered 4 year Apprenticeship Program** which includes 4 years of work experience **OR** 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 OR 6 years practical work experience** under the direct supervision of a Certified Electrical Contractor.

*Journeyman Plumber
(3-year apprenticeship program)

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

* Works under direct supervision of an Electrical or Plumbing Certified Contractor.

Technical Trades	
Rental Apartment Maintenance Repair Technician	Employee of an Apartment Management Company 1 year – see standards for specifications.



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Website: www.pbcgov.org/pzb/contractors

Background Fingerprint Service Providers

Effective 10/1/2015, the Construction Industry Licensing Board (CILB) implemented a new ruling to perform livescan fingerprints during the application and/or renewal of a county license. You must obtain fingerprints to comply with the application requiring a criminal background check for 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/InternetDoc_ServiceProviders_June.aspx

The approved Livescan Providers link is maintained by the Florida Department of Law Enforcement (FDLE). <http://www.fdle.state.fl.us/Criminal-History-Records/Registered-LiveScan-Submitters>

- 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 application review. *Please feel free to provide a copy of this document to the Fingerprint Provider.*

CILB Rule #7 Criminal Record:

- (A.) Criminal Background Checks: 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

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. Credit Scores: 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.