ENGINEERING CONTRACTOR REGISTRATION

Note: No fee is required to register with the City of Weston Engineering Department.

CONTRACTOR INFORMATION

TYPE OF CONTRACTOR: _____

COMPANY NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

QUALIFIER INFORMATION

NAME OF QUALIFIER: _____

PHONE: _____ FAX: _____ EMAIL: _____

DOCUMENTATION – Copies of the following are required for registration. Email all documents to the engineering department email: engineering@westonfl.org

- ☐ State Certification (or State Registration with County Cert of Competency, if applicable)
- ☐ Business Tax Receipt
- ☐ General Liability: "City of Weston" as Certificate Holder
- ☐ Workman's Compensation / Exemption

QUALIFIER SIGNATURE: _____ DATE: _____

STATE OF FLORIDA/COUNTY OF BROWARD
Sworn to (or affirmed) and subscribed before me this _____ day of , 20_____ ,
by_____

_____
Notary's Signature

_____
Print Name of Notary Public

Personally known ☐
OR Produced Identification ☐
Type of Identification Produced_____