



**Town of Palm Beach
Building Division**

360 South County Road
Palm Beach, FL 33480
561.838.5431 (fax) 561.835.4621
www.pzb@townofpalmbeach.com

OFFICIAL
USE
ONLY

Contractor Registration

Name of Business _____

DBA Name _____

Business Address _____ Suite _____

Mailing Address _____ Suite _____
(if different)

Telephone Number _____

Fax Number _____

E-mail _____

Please note that a separate registration will be required for each qualifier within any given organization.

Qualifier Name _____

Certificate of Competency # _____
(State or County License #)

MUST Attach copy of license

I, _____ (qualifier) do hereby assume all liability and understand that my signature will be required on all applications made to the Town and further agree to provide a copy of my insurance certificate/exemption for Worker's Compensation with each permit application.

Qualifier Signature

Date

Registration Fee: \$25.00