



# DEVELOPMENT SERVICES DEPARTMENT - BUILDING SERVICES CONTRACTOR REGISTRATION FORM

Rev: 9 | Revision Date: 9/30/2024 | I.D. Number: CRF

Company Name (DBA): \_\_\_\_\_  
Qualifier Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Main Phone Number: \_\_\_\_\_

## ITEMS REQUIRED FOR REGISTRATION

Contractor registrations can be submitted electronically via LauderBuild at <https://aca-prod.accela.com/FTL/Default.aspx>,

### REQUIRED DOCUMENTS

- State of Florida License or Broward County Certificate of Competency with State Registration, if required.
- Certificate of liability insurance with the City of Fort Lauderdale named as the certificate holder at the following address 700 NW 19th Ave, Fort Lauderdale, FL 33311 (the certificate must show insurance valid in Florida).
- Proof of worker's compensation insurance with the City of Fort Lauderdale named as the certificate holder at the above address (the certificate must show insurance valid in Florida) or proof of State of Florida Worker's Compensation Exemption.
- Copy of the active Sunbiz.org document listing the company's name noted on the license.
- Photo identification (driver's license) of qualifier. We do not require a copy.

**I hereby certify that the information provided is true and accurate.**

\_\_\_\_\_  
Print Name of Qualifier

\_\_\_\_\_  
Signature of Qualifier

STATE OF FLORIDA/COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_ day of \_\_\_\_\_, 202\_\_, by \_\_\_\_\_ (Name and title of authorized officer) for \_\_\_\_\_ (Name of corporation), a \_\_\_\_\_ (whatever type of corporation).

\_\_\_\_\_  
Signature of Notary Public – State of Florida

\_\_\_\_\_  
Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known \_\_\_ OR Produced Identification \_\_\_  
Type of Identification Produced \_\_\_\_\_

