



TOWN OF CUTLER BAY BUILDING DEPARTMENT
10720 CARIBBEAN BOULEVARD, SUITE 110
CUTLER BAY, FL 33157
PHONE # 305-234-5873
FAX # 305-234-5873

CONTRACTOR REGISTRATION

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____ CELLPHONE: _____

IN ORDER FOR CONTRACTORS TO OBTAIN PERMIT FROM THE TOWN OF CUTLER BAY, THEY MUST REGISTER WITH US BY SUBMITTING THE FOLLOWING REQUIREMENTS IN A VALID AND CURRENT STATE:

- ___ 1. State Certification
- ___ 2. State Registration
- ___ 3. Certificate of Competency
- ___ 4. Occupational License
- ___ 5. Liability Insurance
- ___ 6. Workers Compensation Insurance
- ___ 7. Workers Compensation Exemption
- ___ 8. Driver's License
- ___ 9. State Fire Marshall License

Qualifier's Name: _____

Qualifier's Address: _____

PHONE: _____ FAX: _____ CELLPHONE: _____

BOTH THE WORKERS COMPENSATION AND THE LIABILITY INSURANCE MUST BE SENT DIRECTLY FROM YOUR INSURANCE AGENCY. CUTLER BAY MUST APPEAR AS THE CERTIFICATE HOLDER AND IT MUST ALSO STATE A 30 DAY CANCELLATION CLAUSE.

ALL PERMIT APPLICATIONS REQUIRE THE QUALIFIER'S SIGNATURE

THESE DOCUMENTS MAY BE FAXED, HAND DELIVERED OR MAILED. WORKING HOURS ARE MONDAY THRU FRIDAY FROM 8 AM – 3 PM