LICENSE RENEWAL WAIVER ELIGIBILITY AFFIDAVIT
MILITARY PERSONNEL

STATE OF FLORIDA
SS:
COUNTY OF MIAMI-DADE

I ______________________________________, swear/affirm that I hold a Miami-Dade County Certificate of Competency/Eligibility under the provisions listed in Chapter 10-13(3)(C) which states:

Any member of the Armed Forces of the United States on active duty who requests voluntary inactive status and provided documentation to the Board and, at the time of becoming such a member, was entitled to practice or engage in his or her trade in Miami-Dade County and whose license was in good standing with the Board and is no longer acting as a contractor for profit, shall be kept in good standing by the Board without renewing or paying the regular renewal fee and shall not be required to complete the continuing education requirements as long as he or she is a member of the Armed Forces of the United States on active duty and for a period of six (6) months after discharge from active duty.

Furthermore, I have read the foregoing and acknowledged and eligibility under these conditions. I understand that to misrepresent any fact in an application or supporting papers submitted to obtain or to renew a certificate required by this Chapter is a violation of the Code of Miami-Dade County Chapter 10 Section 10-22 (f).

_________________________________________________ Date___________________________
Signature

__________________________________________________
Print Name

State of Florida, County of Miami-Dade:

Sworn to and Subscribed before me this ______ day of _____, 20____

Personally Known ___________ ______________________________ Notary Public

Produce Identification ______________________________             Type: ________________________________
(SEAL)