Construction Trades Qualifying Board

APPLICATION FOR
PERSONAL RECIPROCITY
*EXAM CATEGORIES ONLY*

APPLICATION FEES

JOURNEYMAN ......................................................................................................................... $ 50.00
MASTER........................................................................................................................................ $ 315.00
BUILDING/BUILDING SPECILATIES........................................................................................ $ 315.00

MAKE CHECK PAYABLE TO MIAMI-DADE COUNTY

Refunds may be granted under specific circumstances and in those cases, there will be a non-refundable processing fee of $80. Refund requests must be made in writing no later than 180 calendar days from the exam approved date. Original receipt must be presented for a refund.

APPLICATION SUBMITTAL

Return this application and all supporting documents by mail or hand deliver to the Miami-Dade County Department of Regulatory and Economic Resources, Contractor Licensing, 11805 S.W. 26 Street, Room 207, Miami, FL 33175-2474. If you have questions, please contact one of the following Contractor Licensing staff at (786) 315-2880.

Licensing Representatives
Karen Jackson
Lourdes Maytin
Ronnie Diaz
Melinda Thomas
Llirelka Rodriguez
Maxine Canovas

Supervisor
Jose Lezcano

*For Engineering categories, return application and all supporting documents to the Public Works Department at 111 NW 1st Street, Suite 1510, Miami, FL 33128. For further information call (305) 375-2705.

FILING DATE

All Licensing applications must be reviewed and approved by the Construction Trades Qualifying Board. The completed application along with the supporting documents and fee must be received by the Board meeting deadline. A notice will be sent to the applicant indicating the results of Board and you may also contact us the following Monday after the meeting.
RECIPROCITY CATEGORIES

○ MIAMI DADE COUNTY LICENSE

- GENERAL CONTRACTOR
- BUILDING CONTRACTOR
- RESIDENTIAL CONTRACTOR
- PLUMBING CONTRACTOR
- ELECTRICAL CONTRACTOR
- CONCRETE FORMING & PLACING CONTRACTOR
- FENCE CONTRACTOR
- GLASS & GLAZING CONTRACTOR
- GLASS & GLAZING CONTRACTOR
- DEMOLITION CONTRACTOR
- LATHING & PLASTERING CONTRACTOR
- MISCELLANEOUS METALS CONTRACTOR
- ROOFING CONTRACTOR
- ROOF DECK CONTRACTOR
- SCREEN ENCLOSURE CONTRACTOR
- SIGN NON-ELECTRIC CONTRACTOR
- STRUCTURAL STEEL ERECTION CONTRACTOR
- SWIMMING POOL CONTRACTOR
- UNIT MASONRY MARBLE & EXT. VENEER CONTRACTOR
- MASTER SWIMMING POOL MAINTENANCE UNLIMITED
- MASTER BURGLAR ALARM
- MASTER INSULATION
- MASTER LOW VOLTAGE
- MASTER LAWN SPRINKLER
- MASTER REFRIGERATION & AIR CONDITIONING
- MASTER REFRIGERATION & AIR CONDITIONING

○ BROWARD COUNTY LICENSE

- GENERAL CONTRACTOR CATEGORY
- BUILDING CONTRACTOR CATEGORY
- RESIDENTIAL CONTRACTOR CATEGORY
- PLUMBING CONTRACTOR
- ELECTRICAL CONTRACTOR
- CONCRETE PLACING & FINISHING CATEGORY
- FENCE ERECTION CATEGORY
- GLAZING CATEGORY
- WINDOW AND DOOR CATEGORY
- DEMOLITION CATEGORY
- PLASTERING AND STUCCO CATEGORY
- MISCELLANEOUS METALS ERECTION CATEGORY
- ROOFING CATEGORY
- ROOF DECKS CATEGORY
- SCREEN ENCLOSURE CATEGORY
- SIGN ERECTION (NON-ELECTRIC) CATEGORY
- STRUCTURAL STEEL CATEGORY
- COMMERCIAL POOL/SPA CATEGORY (CPC)
- MASONRY CATEGORY
- SWIMMIMG POOL/SPA SERVICING CATEGORY
- ALARM SYSTEM CONTRACTOR II
- INSULATION CONTRACTOR
- COMMUNICATION & SOUND SYSTEMS
- IRRIGATION SPECIALTY CONTRACTOR
- CLASS A AIR CONDITIONING CONTRACTOR
- CLASS B AIR CONDITIONING CONTRACTOR

NOTE: LICENSE OR CERTIFICATE BEING RECIPROCATED MUST BE CURRENT AND ACTIVE.

THE BOARD MAY ACCEPT RECIPROCITY FOR ADDITIONAL CATEGORIES NOT LISTED ABOVE FROM ANY FLORIDA COUNTY ON A CASE BY CASE BASES. IN ADDITION TO THE ITEMS LISTED ON THE APPLICATION PLEASE INCLUDE THE SCOPE OF WORK DESCRIPTION FOR THE LICENSE CATEGORY YOU CURRENTLY HOLD.
RECI PROCITY CATEGORIES

○ MIAMI DADE COUNTY LICENSE

GENERAL CONTRACTOR
BUILDING CONTRACTOR
RESIDENTIAL CONTRACTOR
PLUMBING CONTRACTOR
ELECTRICAL CONTRACTOR
AIR CONDITIONING CONTRACTOR
DEMOLITION CONTRACTOR
CONCRETE FORMING & PLACING CONTRACTOR
DRYWALL CONTRACTOR
FENCE CONTRACTOR
GLASS & GLAZING CONTRACTOR
METAL AWNING & STORM SHUTTER CONTRACTOR
UNIT MASONRY MARBLE & EXT. VENEER CONTRACTOR
LATHING & PLASTERING CONTRACTOR
REINFORCING STEEL PLACING CONTRACTOR
ROOF DECK CONTRACTOR
ROOFING CONTRACTOR
STRUCTURAL STEEL ERECTION CONTRACTOR

○ PALM BEACH COUNTY LICENSE

GENERAL CONTRACTOR
BUILDING CONTRACTOR
RESIDENTIAL CONTRACTOR
PLUMBING CONTRACTOR
ELECTRICAL CONTRACTOR
HARV CONTRACTORS
DEMOLITION CONTRACTOR
CONCRETE FORMING & PLACING CONTRACTOR
DRYWALL CONTRACTOR
FENCE CONTRACTOR
GLASS & GLAZING CONTRACTOR
HURRRICANE SHUTTER/AWNING CONTRACTOR
MASONRY CONTRACTOR
PLASTERING CONTRACTOR
REINFORCING STEEL CONTRACTOR
ROOF DECK CONTRACTOR
ROOFING CONTRACTOR
STRUCTURAL STEEL ERECTION CONTRACTOR

○ MIAMI DADE COUNTY LICENSE

MASTER LOW VOLTAGE

○ MONROE COUNTY LICENSE

LOW VOLTAGE ELECTRICAL CONTRACTOR

NOTE: LICENSE OR CERTIFICATE BEING RECIPROCATED MUST BE CURRENT AND ACTIVE.

THE BOARD MAY ACCEPT RECIPROCITY FOR ADDITIONAL CATEGORIES NOT LISTED ABOVE FROM ANY FLORIDA COUNTY ON A CASE BY CASE BASES. IN ADDITION TO THE ITEMS LISTED ON THE APPLICATION PLEASE INCLUDE THE SCOPE OF WORK DESCRIPTION FOR THE LICENSE CATEGORY YOU CURRENTLY HOLD.
Construction Trades Qualifying Board
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
11805 S.W. 26th Street, Room 207
Miami, FL  33175-2474

SECTION A: to be filled out by the individual that is filing for a
PERSONAL CERTIFICATION

PLEASE TYPE OR PRINT (must be legible). An answer must be provided for each question. If a
question does not apply indicate “N/A”.

Trade category applying for _____________________________________________

From what County are you reciprocating? ________________________________

1. Name ____________________________________________ Last 4 digits of SS# __________
Phone: Home ______________________ Work ______________________ Pager or Cellular ______________________
Fax: ___________________________ Email Address: _______________________________________________
Address _________________________________________________ City _________________ State ____ Zip Code _____________
Driver’s License No. __________________________ Place of Birth _______________________ Date of Birth __________ Age _____
Include copy of Driver’s License

2. Number of years working in trade applied for: ____________ Yrs. as a Trainee: ____________ Yrs. as Journeyman: ____________

3. If applying for a MASTER examination and the prerequisite is a Miami-Dade County Journeyman certification, when did you pass the
Journeyman examination? __________________________________________

4. Have you previously taken an examination in Miami-Dade County in the category you are now applying for?  Yes _____ No _____
If Yes, when? ____________________________________________________________

5. Were you previously denied in Miami-Dade County to take an examination?  If yes, in which category and for which exam date?
Category ______________________________ Exam date ______________________________

6. As a condition of this application, you will be responsible for becoming familiar with and abiding by the requirements of Chapter 10 of
the Code of Miami-Dade County. Have you read Chapter 10 of the Code of Miami-Dade County?  Yes _____ No _____

7. Do you hold a certificate/license in any of the construction trades issued by any county or state board? Yes _____ No _____
If yes, attach copy.

IMPORTANT NOTE!

Before the Construction Trades Qualifying Board can review your application all trade experience must be documented by letters, W-2 forms,
and/or other documentary proof of such experience from all subject employers. It is the applicant’s responsibility to contact employers and
obtain from them such documentary proof. In place of the letter, an ‘Affidavit of Experience’ form included with this application can be completed
by the employer and provided upon filing the application.

TRADE EXPERIENCE

8. List below your complete trade experience related to the category for which you are applying. Be accurate and detailed since this
information will be verified. If additional space is needed please use back of this page.
(BEGIN WITH CURRENT EMPLOYER)

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In what capacity did you work, or what did you do?


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**EDUCATION**

9. Please provide the following information about your educational background.

**HIGH SCHOOL**
________________________________________________________
City __________________ State _____ Year ________

If applicable General Education Degree (GED)
________________________________________________________
City __________________ State _____ Year ________

**VOCATIONAL/TRADE SCHOOL**
________________________________________________________
City __________________ State _____ Year ________

**COLLEGE**
________________________________________________________
City __________________ State _____ Year ________

DEGREE TITLE ___________________________ Year Obtained ________

**POST GRADUATE**
________________________________________________________
City __________________ State _____ Year ________

**OTHER SCHOOLING (Military Service or other)**
________________________________________________________________________
________________________________________________________________________

**LIST RELEVANT SCHOOL COURSES TAKEN**
________________________________________________________________________
________________________________________________________________________

**LICENSURES**
________________________________________________________________________
________________________________________________________________________

**FUTURE BUSINESS INTENT**

(Not applicable to Journeyman and Maintenanceman applicants)

10. Do you intend to go into business or to qualify a company? Yes _____ No _____ If yes, please indicate below which type of business you may be interested in applying for:

    _____ Sole Proprietorship    _____ Partnership    _____ Corporation/Other Business Entity

If you indicated above intent to later obtain a contractor’s business certificate, the applicable forms will be forwarded to you once your personal certification application has been approved.

RESUME OF APPLICANT’S EXPERIENCE

In order for the CTQB to properly assess your experience in terms of authorized scope of work categories listed in Chapter 10 of the Code of Miami-Dade County, it is required that you complete this resume.

11. PLEASE EXPLAIN IN DETAIL THE WORK YOU HAVE PERFORMED IN THE FIELD IN CONJUNCTION WITH THE CATEGORY IN WHICH YOU ARE REQUESTING TO BE CERTIFIED. IN ADDITION, HIGHLIGHT THOSE JOBS THAT BEST DEMONSTRATE THE SKILLS REQUIRED FOR THE APPLICABLE TRADE.

(ATTACH ADDITIONAL SHEET IF NECESSARY)

I certify that the above described work and experience recorded represents to the best of my knowledge all information relative to the scope of work and category for which I am applying. I further certify that all supporting documentation submitted with this application is true and accurate. I understand that an issuance of a personal certificate does not permit me to act as a contractor in the trade concerned and in order to work in the trade I must be employed by a licensed contractor. I realize that if I do contract without a contractor's business certificate of competency, I will face the possibility of receiving a fine of up to $5,000 on each count and my personal certificate could be suspended or revoked by the Miami-Dade County Construction Trades Qualifying Board. I understand that refunds may be granted under specific circumstances but will not include a non-refundable process fee of $80.

X_____________________________________
Applicant’s Signature

STATE OF _______________________________
COUNTY OF _____________________________

The foregoing instrument was acknowledged before me this __________ day of __________________, 20____, by _____________________________________________ , who is personally known to me or who has produced a __________________________________________________ as identification and who did / did not take an oath.

_________________________________________
NOTARY PUBLIC
CHECKLIST

Personal Application

☐ Copy of Drivers License

☐ Copy of Social Security Card

☐ Passport Size Photograph

☐ Letter of Reciprocity with Current/Active License

☐ Completed Application(s) Signed & Notarized

☐ Fee(s)

☐ Copy of Current/Active County License

*INCOMPLETE APPLICATIONS WILL BE RETURNED*