



Department of Regulatory and Economic Resources Contractor
Licensing Section
11805 S.W. 26 Street, Room 207
Miami, Florida 33175-2474
Ph. (786) 315-2880 Main Number- Fax. (786) 315-2450

MIAMI-DADE COUNTY SWIMMING POOL CLEANER REGISTRATION APPLICATION

1. Complete all pages of the application.
2. Attach a copy of the Registrant's driver's license.
3. Attach a copy of your Certified Pool Operator's (CPO) certification.
4. Attach a Certificate of Insurance for public liability insurance with limits of liability not less than fifty thousand dollars (\$50,000.00) per accident or occurrence for bodily injury and twenty-five thousand dollars (\$25,000.00) per accident for property damage made out to:

Department of Regulatory and Economic Resources
11805 S.W. 26 Street, Room 207
Miami, Florida 33175-2474

5. Required Registration/Renewal/ Change of name Fee \$60.00

Advisory Notes:

- 1.) Registering company names which indicate a scope of work beyond cleaning pools, which otherwise requires a certificate of competency, will be deemed advertising without a license and may result in a civil citation. Performing work beyond the scope of the swimming pool cleaning registration will result in a civil citation for unlicensed contractor activity.
- 2.) Any person doing business in Miami-Dade County must obtain a Miami-Dade County Local Business Tax Receipt. Businesses also need to obtain a city Business Tax Receipt from the municipality where the business is located. The Local Business Tax is imposed for the privilege of doing business in Miami-Dade County. Persons who provide merchandise, entertainment or services to the public, even if only a one-person company or home-based business, must obtain a Local Business Tax Receipt before starting to operate.

For unincorporated areas of Miami-Dade County contact the County Tax Collector.

**LOCAL BUSINESS TAX SECTION (OCCUPATIONAL LICENSE)
200 NW 2 AVE
Miami, Florida 33128
(305) 270-4949**

MIAMI-DADE COUNTY SWIMMING POOL CLEANER REGISTRATION APPLICATION

Date _____

____ New Registration

____ Change of Name to Existing Registration

REGISTRANT INFORMATION

Name _____

Home Address _____ Telephone No. (____) _____

City, State, Zip Code _____

Date of Birth _____ Last 4 digits of SS No.: _____

Driver's License No.: _____

BUSINESS INFORMATION

Company Name _____

Address _____ Business No.: (____) _____

City, State, Zip Code _____

Email Address: _____ Cell Phone No.: _____

Fax No.: (____) _____

CERTIFIED POOL OPERATOR INFORMATION

CPO Provider: _____ CPO No.: _____

CPO Issue Date: _____ CPO Expiration Date: _____

ACKNOWLEDGMENT OF REGISTRANT

Miami-Dade County Chapter 10 Section 10-2 V. (B) (5) (e) Certification under this Chapter is not required for individuals who are solely engaged in the cleaning and treatment of water in existing swimming pools. All such individuals shall be required to register with the Department on a form adopted by the Department. As a precondition for registration, persons engaged in the cleaning and treatment of water in swimming pools shall:

- 1.) Maintain at all times with an insurance company authorized to do business in the State of Florida public liability insurance with limits of liability not less than fifty thousand dollars (\$50,000.00) per accident or occurrence for bodily injury and twenty-five thousand dollars (\$25,000.00) per accident for property damage. The insurance shall provide by endorsement of the policy that the Insurer shall notify the Secretary of the Board by certified or registered mail of the intent to cancel the policy for any reason, at least thirty (30) days prior to such cancellation.
- 2.) Possess a current swimming pool operator's certificate.
- 3.) Identify all trucks used in the furtherance of their business by use in the transporting of materials, equipment or employees to a job site, excepting a truck owned by an employee which truck is only used for private transportation or in carrying employees' personal tools and personal equipment necessary to fulfill their job tasks, by placing on the sides thereof, in a permanent manner, identification, by name or symbol, and their registration number, in letters and numerals not less than three (3) inches in height, excepting those trucks rented or leased by a contractor from a commercial vehicle rental agency for a period of less than one (1) month and such trucks are plainly marked with the name of the lessor in letters and numerals not less than three (3) inches in height.

All registrations shall be valid for one year and shall expire on the last day of September. Annual renewal shall include verification of continued qualification for certification exemption. A registration fee of sixty dollars (\$60.00) shall be assessed at initial registration and renewal.

X _____
Signature of Registrant

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Before me this day personally appeared _____ who deposes and says that all information submitted herein for the purpose of registration is true and accurate. Sworn to and subscribed before me this _____ day of _____ 20 _____.

Check one:

Personally known to me: _____

Produced identification: _____

My Commission Expires _____

NOTARY PUBLIC