



Meeting Date:_____

Deadline:_____

Construction Trades Qualifying Board
**APPLICATION FOR
BUSINESS CERTIFICATION
OR
ADDING D/B/A TO EXISTING
BUSINESS LICENSE**

BUSINESS APPLICATION INCLUDING D/B/A..... \$ 315.00

(Business Application not applicable to Journeyman and Maintenance man applicants)

ADD DBA TO EXISTING BUSINESS LICENSE.....\$ 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 to the Miami-Dade County Department of Regulatory & Economic Resources, Contractor Licensing, 11805 S.W. 26 Street, Room 207, Miami, FL 33175. You may also hand deliver documents to the Contractor Licensing Section located on the 2nd floor of the same building. If you have questions, please contact one of the following Contractor Licensing staff at (786) 315-2880.

Licensing Representatives

Maxine Canovas
Karen Jackson
Melinda Thomas
Juliet Arvelo
Julio Coronado

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 application deadline. A notice will be sent to the applicant indicating the results of the Board and you may also contact us the following Monday after the meeting.



Construction Trades Qualifying Board
APPLICATION INSTRUCTIONS FOR MIAMI-DADE COUNTY
CONTRACTOR'S BUSINESS CERTIFICATE OF COMPETENCY

CODE REGULATIONS Chapter 10 of the Code Of Miami-Dade County requires any persons, sole proprietorships, partnerships or other business entities desiring to engage in the business or acting in the capacity of a contractor or subcontractor in the construction field in both the incorporated and unincorporated areas of Miami-Dade County to be approved and certified by the Miami-Dade County Construction Trades Qualifying Board (CTQB), State of Florida Construction Industry Licensing Board or the State of Florida Electrical Contractors Licensing Board. The CTQB will, as authorized by law, consider the work experience of the qualifying agent, financial status and other pertinent information relative to the applicant in determining if the application should be approved.

APPLICATION GUIDELINES

1. The following are guidelines on the applications required to be completed in order to obtain a Business Certificate of Competency: Applications may be typed or handwritten with blue/black ink (must be legible).

- If a Corporation or a Business Entity other than a sole proprietorship or partnership, a **Business Application for Corporation/Business Entity** form must be completed. (Section A of the application must be completed by the Qualifying Agent. Section B of the application must be completed by the Qualifying Agent, president or authorized officer.)
- If a Sole Proprietorship, a **Business Application for a Proprietorship** form must be completed. (The qualifying agent must complete the entire business application.)
- If a Partnership, a **Business Application for a Partnership** form must be completed. (Section A of the personal application must be completed by the Qualifying Agent.) (Section B of the Business Application must be completed by the Qualifying Agent of the Partnership and the Partners of the Company.)
- For a Change of Affiliation, a **Business Application, Outgoing Affidavit (Change of Affiliation)** form must be completed.
- To place a certificate in inactive status, an **Outgoing Affidavit (Inactive Status)** form must be completed.
- To add a "DBA" to an existing LICENSED company name, a **Business Application** form must be completed along with a fee of \$315.00.
- In all cases make sure the company name is not misleading by indicating you can perform work beyond the category you are applying for. Please contact our office if you are not clear and before creating a corporation.

2. An answer must be provided for each question. If a question does not apply, please indicate "N/A" (Not Applicable).

3. Applications must be sworn to before a Notary Public and bear a Notary Seal. Applicants are responsible for having the business application notarized prior to submission to the Contractor Licensing Section.

4. The Qualifying Agent must have a significant interest or financial interest in the entity he/she is qualifying as evidenced by his/her position as an officer or partner or principal stockholder in accordance with Section 10-6 (E) 5 of the Code of Miami-Dade County.

5. If you are qualifying a Corporation, you must obtain from the Secretary of State, Tallahassee, Florida, the **CERTIFICATE OF STATUS UNDER THE GREAT SEAL** showing the corporation is currently authorized to do business in Florida. A copy must be submitted with the application.

6. The applicant must submit a copy of the Articles of Incorporation with proof of acknowledgment by the Florida Department of State or By-laws, whichever applicable. To obtain or make a change to the Articles of Incorporation call the Florida Department of State, Division of Corporations at (850) 245-6051/(850) 245-6052 or visit their website www.sunbiz.org.

7. Under the *Fictitious Name Law*, if your business entity (does not apply to corporations) bears something other than your full legal name, it is necessary that you secure a certificate from the Secretary of State, Tallahassee, Florida, at (850) 245-6058 indicating that you have registered. This certificate must be submitted with the application.

8. If you are qualifying a business entity other than a corporation or Sole-Proprietor, you must submit documents that demonstrate the ownership interest of the business including, but not limited to, name, home address, and ownership interest.

9. **CERTIFICATE OF GENERAL LIABILITY INSURANCE.** A certificate of general liability insurance must be provided with the following minimum insurance requirements before a Contractor's Certificate of Competency can be issued.

Minimum Insurance Limits:

- Bodily Injury Liability \$300,000 Per accident or occurrence
- Property Damage \$ 50,000 Per accident or occurrence

The Certificate of General Liability Insurance must be in the name of the Sole Proprietorship, Partnership, Joint Venture, Corporation or other business entity. **The Certificate of General Liability Insurance should not be obtained until after the application has been approved by the CTQB.**

NOTE: Insurance certificate must be made out to: Miami-Dade County Department of Regulatory and Economic Resources, 11805 S.W. 26 Street, Room 207, Miami, FL 33175.

10. **CERTIFICATE OF WORKER'S COMPENSATION INSURANCE** Worker's compensation insurance must be presented to the municipal building department when pulling permits. In the case of the Unincorporated Dade County Regulatory and Economic Resources Department, worker's compensation insurance must first be presented to the Contractor Licensing Section in order to pull permits and/or engage in business. If a contractor applicant is exempt from the Worker's Compensation Insurance, he/she must submit to the Contractor Licensing Section an executed exemption issued by the Florida Division of Worker's Compensation (305) 536-0306 / (850) 419-1609 <http://www.myfloridacfo.com/division/WC/>. The certificate must be issued to the qualifier and company name.

11. All qualifying agents qualifying a by Miami-Dade County Department are exempt from providing a Certificate of General Liability and Worker's Compensation Insurance.

12. Pursuant to Administrative Order No. 4-112, the following fee must accompany the application:

- **\$315 per Business Certificate of Competency or add D/B/A.**
If you are an active certified contractor and want to add additional qualifying agent(s), you must submit a personal and business application and pay the required fee of \$630.00 for each additional qualifying agent.
- **\$350 per Change of Affiliation**
A Change of Affiliation occurs when an active certified contractor changes the name of their business or wishes to leave the company he/she is qualifying in order to qualify another business entity. Please note, that a personal certificate of eligibility is required before you can qualify a business.
- **\$150 per Inactivation of Business Certificate of Competency**

Note: Please make your check payable to Miami-Dade County

13. **FILING DATE:** Before CTQB can consider the issuance of a business certificate of competency; a personal & business credit reports must be ordered by the applicant and received prior to the meeting. Also, the completed application, along with all supporting documents as required with the fee, must be received at least thirty (30) calendar days before the next scheduled CTQB meeting. A notice of the board decision will be sent to the applicant approximately ten (10) business days after the CTQB meeting.

14. **IMPORTANT!** If you fail to finalize your paperwork within **180 days from the date of CTQB approval**, your application will be **NULL AND VOID** and you will be required to pay the full application fee to re-file.

15. **APPLICATION SUBMITTAL** Return this application and all supporting documents by mail to the Miami-Dade County Regulatory and Economic Resources Department, Contractor Licensing, 11805 S.W. 26 Street, Room 207, Miami, Florida 33175-2474. You may also hand deliver documents to Contractor Licensing located on the 2nd floor of the same building. If you have questions, please contact the Contractor Licensing staff at (786) 315-2880.

NO APPLICATION OR PART THEREOF WILL BE ACCEPTED UNLESS COMPLETELY FILLED OUT, PROPERLY EXECUTED AND ACCOMPANIED BY ALL REQUIRED SUPPORTING DOCUMENTS AND THE REQUIRED FEE.



SECTION B- **BUSINESS APPLICATION** for a **CORPORATION/BUSINESS ENTITY**

Qualifier Information (To be completed by the Qualifying Agent)

WOULD YOU BE QUALIFYING AN EXISTING COUNTY CONTRACTOR: No ____ Yes ____, If yes, license number _____.

Trade and Category (Refer to category list)

1.

Name of Qualifying Agent (applicant)

Last 4 digits of Social

Home Address

City

State

Zip Code

Home Telephone No.

Driver's License No.

Height

Weight

Color of Hair

Date of Birth

Place of Birth (City and State)

Business Name

Position

DBA Name (if any)

Business Address

City

State

Zip Code

Business Telephone No.

Business Fax No.

Email Address

Name of qualifying agent who completed SECTION A.

Provide his/her title in connection with the business entity

2. Were you ever refused a contractor's license? NO ☐ YES ☐

What type of license?

Where?

Why were you refused?

3. a. Do you currently hold a certificate issued by any Florida State Board? NO ☐ YES ☐

If YES, provide Certificate No. _____ and names of the business entity you qualify (or indicate 'Inactive', if appropriate).

c. Are you qualifying a business entity in this or some other county within the State of Florida?

NO ☐ YES ☐ If YES, in what county

In what trade?

Provide name of business entity

If applicable, provide state registration No.

4. List the principal stockholders/equity holders and the percentage of stock owned/ownership interest by each of them:
- | NAME, ADDRESS AND OFFICE HELD | PERCENTAGE OF STOCK/
OWNERSHIP INTEREST |
|-------------------------------|--|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
5. List all businesses owned, operated, or managed by you at the present time, and all businesses in which you have had an active part in Florida or elsewhere during the last five years with addresses.

6. REFERENCES: list four references which can provide information as to your competency and financial responsibility. An employer, and architect or engineer, a supply house and a financial institution are suggested.

1.	_____	_____	_____
	Name	Address	Telephone No.
2.	_____	_____	_____
	Name	Address	Telephone No.
3.	_____	_____	_____
	Name	Address	Telephone No.
4.	_____	_____	_____
	Name	Address	Telephone No.

7. Provide below the name, address and telephone no. of all officers. (Use additional sheet if necessary)

	NAME	ADDRESS	TELEPHONE No.
PRESIDENT	_____		
VICE- PRESIDENT	_____		
SECRETARY	_____		
TREASURER	_____		
CHIEF CONST. MANAGER	_____		

DIRECTOR _____
DIRECTOR _____
OTHER _____

8. Have any of the Officers or Directors of the corporation/business entity been arrested or convicted of a felony in the state of Florida or elsewhere? NO ___ YES ___ If YES, state where and the nature of offense. Provide name of court and case number.

9. Are any of the Officers or Directors of the corporation/business entity presently charged with committing a felony? NO ☐ YES ☐ If YES, state where and nature of offense. Provide name of court and case number.

10. Have any of the officers or directors failed in business in the last five years? NO ☐ YES ☐ If YES, please specific details.

11. Have you or has any officer or director as an individual, or as an officer or director of a corporation or as a member of a business entity ever committed an act within the past three years which if committed by a licensed contractor would be grounds for suspension or revocation of such contractor's license? NO ☐ YES ☐ If YES, please provide details

12. Have you or has any officer or director as an individual or officer or director of a corporation or member of a business entity, ever benefited from or caused injury to another as the result of an act within the past three years involving dishonesty, fraud, negligence, deceit or lack of integrity? NO ☐ YES ☐ If YES, please explain.

13. Have you or any member of the business entity or officer or director of the corporation ever had a Certificate of Competency suspended or revoked by the Florida Construction Industry Licensing Board or other state licensing authority or the licensing authority of another municipality or county whether located in the State of Florida or another state? NO ☐ YES ☐ If YES, please explain.

The following are definitions needed in order to answer the next set of questions.

(i) If a corporation, the qualifying agent, the president, vice-president, secretary and any stockholder controlling 25% or more of the stock in the corporation; if a joint venture, the qualifying agent, partners or president, vice-president, secretary and any stockholder controlling 25% or more of the stock in the corporations if the joint venture is comprised of corporations, if any other business entity, the chief officer and any other officer relevant to the record keeping or finances of the business entity as well as any owner of the business entity owning 25% or more of the business entity.

(ii) For purpose of this rule "responsible person" includes a qualifying agent, any partner, joint venture partner, corporate officer, corporate director, trustee and stockholder controlling 25% or more in a corporation.

14. Has any bonding or surety company ever completed or made a financial settlement upon any construction contract work undertaken by any person named in (i) above or any organization in which such person was a responsible person as defined in (ii) above? NO ☐ YES ☐
15. Are there now any liens, suits or judgments of record or pending against any person named in (i) above or any organization in which any such person was a responsible person as defined in (ii) above, as a result of the construction operations of such person or organization? NO ☐ YES ☐
16. Are there now any liens of record by the U.S. Internal Revenue Service or the State of Florida Corporate Tax Division against any person named in (i) above or any organization in which any such person was a responsible person as defined in (ii) above? NO ☐ YES ☐
17. Has any person named in (i) above or has any organization in which any such person was a responsible person as defined in (ii) above ever made an assignment of assets in settlement of construction obligations for less than the total amount of the indebtedness? NO ☐ YES ☐
18. Has any person named in (i) above or has any business entity in which any person was a member been convicted of acting in the capacity of a contractor without a license or if licensed as a contractor in this or any other state has any disciplinary action (including probation, fine or reprimand) ever been taken against such license by a state, county or municipality? NO ☐ YES ☐
19. Has any person in (i) above or has any business entity in which such person was a responsible person as defined in (ii) above ever been convicted of a felony within the past five years in this state or elsewhere? NO ☐ YES ☐
20. Does the Qualifying Agent have a significant management and/or financial interest in the contracting business he/she is qualifying as evidenced by his/her position as an officer or principal stockholder in the business entity? NO ☐ YES ☐
If YES, provide position _____, percentage of ownership interest _____%.

I hereby certify that _____ is the qualifying agent for the corporation/business entity and that he/she has the authority to act for the corporation/business entity in all matters connected with the contracting business and will supervise the construction under the certificate of competency issued to the corporation/business entity and the corporation/business entity will assume full responsibility for the actions of the qualifying agent in connection therewith.

I further certify that I will notify the Construction Trades Qualifying Board (CTQB) immediately if the above named qualifying agent, severs his/her connection with the corporation/business entity. I further agree that the CTQB may obtain information concerning the financial condition of the corporation/business entity from any source, including confidential information. The above is a full disclosure of all parties of interest in this application to the best of my knowledge. I am aware that we must finalize the paperwork within 180 days from the date of CTQB approval and failure to do so will result in the application becoming null and void and we will be required to pay the full fee to refile.

X _____
SIGNATURE of President or other Officer
Authorized to Bind Corporation/Business Entity other
than the Qualifying Agent

PRINT NAME & TITLE

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to and Subscribed before me that this is a true statement this _____ day of _____ 20____

My Commission Expires _____

NOTARY PUBLIC

CHECKLIST

Business Application

Copy of Drivers License

Copy of Social Security Card

Completed Application(s) Signed and Notarized

Florida - Articles of Incorporation

**Personal Credit Report (Equifax or Experian)
(Public records section only)**

**Business Credit Report (Dun & Bradstreet,
Experian or TransUnion) (Public records section
only)**

For add D/B/A – Only Business Credit Report

Fee(s)

INCOMPLETE APPLICATIONS WILL BE RETURNED