



APPLICATION FOR MECHANIC/APPRENTICE PERMIT

Application Type: Check one of the following:

- Initial Renewal (1 yr) Renewal (2 yrs)

LICENSE OR PERMIT APPLIED FOR: Check one of the following:

- Certified Mechanic or Technician Exempt Mechanic (if you qualify) Apprentice Permit
Check one of the following:
Paint & Body Apprentice
Mechanic Apprentice

APPLICANT INFORMATION: (please print clearly)

Full Legal Name:
Address: Apt/Suite Number: Zip Code:
Mailing Address (if applicable): Zip Code:
Phone Number: Cell Number:
Email Address: County Permit Number:
Date of Birth: Driver's License Number:

EMPLOYMENT INFORMATION: PLEASE CHECK BOX IF UNEMPLOYED
Business Name :
Address: Zip Code:
Shop MVR Number: Business Phone:

Please answer yes or no to the following question:

Yes No Do you owe any money to Miami-Dade County, either individually or through any other business?
(unpaid liens, administrative costs, etc.) If yes, please provide details on a separate sheet.

**\*\*\*SEE BELOW FOR IMPORTANT INFORMATION\*\*\***

- **LICENSE OR PERMIT APPLIED FOR: CERTIFIED MECHANIC/TECHNICIAN** - An applicant wishing to obtain a Certified Master Mechanic, Specialty Mechanic or a Paint/Body Technician license, must provide **originals** of each current ASE and/or AATI certification he or she holds. No copies or faxes. In addition to the foregoing, an applicant wishing to **renew** his or her certification must submit proof of 16 hours continuing education for each year he or she has applied for. **A license shall only be issued for those repair categories an applicant has qualified for** (See item no. 6 for the applicable license fees). Pursuant to section 8A-161.24 of the Miami-Dade Code, certified specialty mechanics & paint/body technicians shall not supervise repair work performed by more than two apprentices. A master mechanic may only supervise up to three apprentices.
- **APPLICANT INFORMATION:** All applications must be entirely filled out by the person applying for the license. Incomplete applications, such as those without full payment, signature or required documents will be immediately denied. A copy of the applicant's picture identification will be required if someone else is submitting the application and paperwork for the applicant.
- **EMPLOYMENT INFORMATION:** Provide the contact information of your employer(s). If you are unemployed, check the appropriate box. It is illegal to operate as an independent mobile mechanic/technician without a motor vehicle repair shop license. As a certified mechanic/technician you may only qualify **one** shop.

**Complete the following checklist including those items attached or enclosed with this application:**

- **UNDERLINED** items apply only to persons applying for a Certified permit -

- |   |  |
|---|--|
| <input type="checkbox"/> Completed Application                                  | <input type="checkbox"/> <u>ASE or AATI Certification</u>                        |
| <input type="checkbox"/> License Fees   | <input type="checkbox"/> <u>Exempt Sworn Statement</u>                           |
| <input type="checkbox"/> <u>Proof of 16 Hours Continuing Education (1 year)</u> | <input type="checkbox"/> <u>Proof of 32 Hours Continuing Education (2 years)</u> |
| <input type="checkbox"/> Copy of Applicant's Driver's License                   |  |

I, \_\_\_\_\_, the undersigned, under penalties of perjury, declare that I have read the foregoing application and verify that the facts stated in it are true and complete. I will abide by the provisions of the Code of Miami-Dade County and all other applicable laws. I understand that civil penalties may be imposed for violations of the Miami-Dade County Code I acknowledge that omissions or false statements will be grounds for suspension, revocation or non-issuance of a license or permit.. **I further acknowledge that all license and permit fees are non-refundable and that incomplete applications shall be immediately denied.**

There are two options for submission:

- 1) Print this application, sign and date, and mail to our office with fees and required items from checklist above.
- 2) e-sign, upload along with required items from checklist above at [https://energov.miamidade.gov/EnerGov\\_Prod/SelfService#/home](https://energov.miamidade.gov/EnerGov_Prod/SelfService#/home) and pay fees.

**Instructions for e-sign:**

- 1) type **/s/** at the beginning of each signature block; 2) then type your full name; 3) date the application.
- Your e-signature should appear as: **/s/ Jane Doe**

An electronic signature has the same force and effect as a written signature, pursuant to Section 668.004, Florida Statutes

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**APPLICANT SIGNATURE**

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**DATE**