

# Application Instructions for Local Specialty and State Registered (Certificate of Competency)

For questions regarding the following instructions, please email licensing@HCFLGov.net\_or call (813) 272-5600

# 1. WHO SHALL FILE FOR A CERTIFICATE OF COMPETENCY (CONTRACTOR'S LICENSE):

Any resident or non-resident of Hillsborough County who intends to operate a business or qualify a partnership, firm or corporation; or contract or sub-contract (except where exempted by law) as an individual in the City of Tampa, Temple Terrace, Plant City, and/or Hillsborough County under any regulated contractor classification. Approval for licensing is granted by the appropriate Hillsborough County Board of Adjustment, Appeals, and Examiners. The Boards are Building, Electrical, Mechanical, and Plumbing/Gas. Hereafter referred to as the Board.

More licensing information is available in the Contractor Licensing section on the County website.

# 2. APPLICATION SUBMITTAL AND FEES:

Applications should be submitted online via the HillsGovHub portal. Follow the Create Contractor License Applications user guide when you are ready to submit. Items required for upload during the submittal process are listed on the Checklist for Application Submittal page of this application packet. Application status updates will be provided via email.

Total application fee is **\$280**. A **non-refundable fee of \$50** is required to initiate the application process and **\$230** is due upon application acceptance.

## 3. IMPORTANT GUIDELINES FOR APPLICATION SUBMITTAL AND YOUR PROTECTION:

**For your protection** – **do not submit any documents with protected personal information.** This includes, but is not limited to, information such as social security numbers, driver's license numbers, bank or credit card account numbers, or any other information which could potentially compromise your identity or credit. Redact or "mark out" any such information prior to sending any documents.

# 4. CREDIT REPORT AND CRIMINAL BACKGROUND CHECK:

Staff will obtain your credit report & criminal background check. Staff will contact you by phone to obtain needed information for report purposes only. Your information is not recorded or retained after the reports are ordered. If there are items of concern on your report, you will be provided with a copy.

#### 5. BOARD HEARING:

The Board reviews applications for approval. Hearing attendance is not mandatory but is highly recommended to answer any questions the Board may have. You will be notified by email regarding hearing date, time, and location. Contact Contractor Licensing directly for a schedule of Board hearing dates and deadlines to submit application.

#### 6. EXAMINATION:

Upon Board approval, your contact information will be provided to the testing agency you selected during application submittal. The agency will contact you directly. All exam scheduling, payments, locations, and instructions will be handled by the testing agency. They will also provide a list of reference materials for the exams.

There are 2 (two) exams required of each license and the **minimum score required is 75%**. One exam is on the fundamentals of the trade; the second exam is on basic Florida business law. Exams are open book. Verify with the testing agency their policy regarding all rules and procedure.

Consideration for persons qualifying under the American Disabilities Act may be arranged through the testing agency. In order to qualify, the applicant must meet ADA requirements and furnish required documentation from a doctor to the testing agency.



# Application Instructions for Local Specialty and State Registered (Certificate of Competency)

# 7. RECIPROCITY APPLICANTS:

Reciprocity refers to exam scores only. Hillsborough County reciprocates only with jurisdictions which reciprocate in turn. If you did not score a minimum of **75%** on either part of the exam, the Board will require you to re-test. For additional items required specific to reciprocity, see the Checklist for Application Submittal page of this application packet. After Board approval, Contractor Licensing will email you instruction to complete license registration.

# 8. LICENSE REGISTRATION AND FEES:

After passing your exams, please email licensing@HCFLGov.net for instruction to complete license registration. Insurance and bond information will be required for upload during this process. Forms and information are provided in this packet.

The license registration fee will also be due. The fee is \$140 for a 2-year cycle. The cycle begins on August 31st of odd years. If your registration falls in between cycles, this fee may vary slightly.

## 9. STATE REGISTRATION:

Some trades will require registration with the State of Florida before the license can be activated in Hillsborough County. See the Trades Which Require a License page of this application packet. It is the applicant's responsibility to contact the Department of Business & Professional Regulation (DBPR) to register their license. State registration information can be found on the DBPR web site www.myfloridalicense.com. You are required to continue renewing **both** the Hillsborough County registration and State of Florida registration (inquire with the DBPR regarding their renewal process).

A state registered license is valid only in the issuing jurisdiction and you will have to apply for reciprocity in other jurisdictions. All licenses listed as requiring state registration are offered as CERTIFIED directly through the DBPR. It is suggested to research if the CERTIFIED license may be a better option for you because the CERTIFIED license valid statewide.

### **10. LICENSE RENEWALS:**

Notifications will be sent to your email address on file prior to the license expiration date. If a license is not renewed for a period of 5 years or more, the license becomes invalid and you must apply as a new applicant, including retesting.

#### **11. APPROVED APPLICATION REQUIREMENT:**

If a license is not activated within 12 months of Board approval, the approval becomes void, and you must begin the licensing process as new applicant.

#### **12. DENIED APPLICATIONS:**

Applications which are denied by the Board cannot re-apply less than 6 months from date of Board denial. Re-submittals will require payment of the full application fee. A new background check and credit report will be made a part of the re-submittal package. Denied applications are kept for a period of 12 months from date of the original Board Hearing.



# Suggested Guidelines for Credit Report and Experience Details

# The following information can significantly aid in Board determination of your eligibility to obtain a Contractor's License/Certificate of Competency. In order to submit an application that best represents you as an individual, please review the below carefully.

# CREDIT AND CRIMINAL BACKGROUND CHECK:

Members of the Board are required to ascertain whether an applicant for a Contractor's License/Certificate of Competency demonstrates current good credit. Therefore, it is incumbent upon an applicant to review his or her credit report prior to appearing before the Board and be prepared to explain any discrepancies existing at that time. If there are significant issues with your credit report or if you believe there are errors, it is in your best interest to supply additional information to the Board from other sources showing evidence of good credit, such as the establishment of a recent line of credit with a business partner/suppliers, or updated accounts reflecting their current payment status. These items should be officially issued by companies on letterhead or company statements and have account numbers (where applicable).

Copies of evidence or official relevant information regarding flagged items shall be provided to the building department no later than ten (10) days prior to the hearing. Bringing documents to the hearing is not recommended as the Board collectively spends hours of their own time reviewing applications and cannot give an accurate and thorough review of additional data during the hearing. The Board reserves the right to not admit the materials if brought to the hearing.

For any flagged items on your background check, please provide written explanation and any official court documents that may be relevant to the charges.

# **VERFICATION OF CONSTRUCTION EXPERIENCE:**

Members of the Board are required to ascertain whether applicants demonstrate the appropriate amount of hands-on experience to qualify for the Certificate of Competency (Contractor's License) in the trade in which you are applying. Your experience can only be verified by a contractor of the same trade or a trade that includes the scope of work for which you are applying.

Please provide explicit information and/or explanations to make it easier for the Board to evaluate your past work. You may do this on your Work History form. Also, have the Contractor on your Verification of Experience form include such details. Describe the type of hands-on work performed. Describe the kind of buildings, structures, or projects worked upon. Give any details that might aid in evaluating your experience. Attach additional page(s) as necessary.

If you are from a State that does not license contractors or trade specialties, the Board will most likely require a verification from a registered architect or professional engineer that can attest to your past work experience. Verification from a family member is not acceptable. Furthermore, the person verifying your work experience must have his/her signature notarized in accordance with applicable laws. Please verify these requirements.



# Requirements for Application Submittal

# ALL ITEMS ARE REQUIRED TO BE UPLOADED DURING APPLICATION SUBMITTAL IN HILLSGOVHUB:

PDF format is required

- **Two (2) personal/character reference letters** (Non-work related & to be dated and notarized)
- □ Verification of Construction Experience forms
- **Copies of any certificates of completion from any accredited school or program** (Optional)
- Additional Item that may be required: If the contractor verifying your work experience is not a Certified State of Florida contractor, a copy of his/her contractor's license is required. The license must have required testing for the license holder to be qualified to complete the Verification of Experience form.

## THE FOLLOWING ITEMS ARE REQUIRED FOR RECIPROCITY APPLICATIONS ONLY:

PDF format is required

- □ If applying for Reciprocity, please have the County/Jurisdiction in which you took your exams send a letter of reciprocity **prior** to application submittal to Hillsborough County. Reciprocity letter requirements can be found in the Contractor Licensing section on the County website.
- If applying for Reciprocity, include a copy of all contractor licenses you hold in any other County/Jurisdiction (and from the State of Florida if you are a State Registered license holder) with your application.

Illegible, incomplete, or altered applications will not be accepted.

# Please Note: Documents cannot be notarized by family members

# **INSURANCE AND BOND DOCUMENTS:**

Insurance and bond documents are not required with application submittal. General Liability Certificate of Insurance, Worker's Compensation Certificate of Insurance or exemption, and Hillsborough County Code Compliance Bond will be required for upload during license registration. Information and forms are provided in this application packet.



# Trades Which Require a License in Hillsborough County

| LOCAL SPECIALTY LICENSES   | STATE REGISTERED LICENSES   |
|--|---|
| These license types do not require additional registration with the State of Florida           | These licenses require additional registration with the<br>State of Florida Department of Business & Professional<br>Regulation (DBPR)<br>See State Registration section in instructions. |
| Years of experience required located in parentheses next to the trade.<br>1 year = 2,000 hours | Years of experience required located in parentheses next to the trade.<br>1 year = 2,000 hours  |
| Aluminum Structure (1)   | Building Trades:  |
| Demolition (1)   | General Contractor (4)  |
| Drywall (1)  | Building Contractor (4)   |
| Glass & Glazing (1)  | Residential Contractor (4)  |
| Irrigation (1)   | Roofing Contractor (4)  |
| Marine Contractor (4)  | Pool/Spa Commercial (4)   |
|  | Pool/Spa Residential (4)  |
|  | Pool/Spa Servicing (1)  |
|  | Pool/Spa Maintenance (1)  |
|  | Underground Utility & Excavation (4)  |
|  | Electrical Trades:  |
|  | Electrical, Master (6)  |
|  | Electrical, Residential (3)   |
|  | Electrical, Low Voltage (3)   |
|  | Electrical, Alarm System Contractor I (3)   |
|  | Electrical, Alarm System Contractor II (3)  |
|  | Electrical, Signs (3)   |
|  | Mechanical Trades:  |
|  | Mechanical (4)  |
|  | Class A Air Conditioning (4)  |
|  | Class B Air Conditioning (4)  |
|  | Plumbing Trade:   |
|  | Plumbing with Gas (4)   |



**PLEASE NOTE:** If the contractor verifying your work experience is not a Certified State of Florida contractor, include a copy of his/ her contractor's license. The license must have required testing for the license holder to be qualified to complete the Verification of Experience form.

**PLEASE NOTE:** If applicant is self-employed, notarized letters from building officials, licensing agencies, and/or contractors you performed work for may be submitted for Board consideration. Provide official documents on letterhead with verifier's title/position, contact information, and notarized signature. Verification letters must be furnished to substantiate the minimum experience in the trade. It is suggested you submit letters from multiple sources. Letters must contain **significant detail of hands-on experience**.

| Date:                                     |                            |               |             |                |                  |              |             |            |
|---|----------------------------|---------------|-------------|----------------|------------------|--------------|-------------|------------|
| In reference to applicant: _              | First                      |               | Middle      |                | Last             |              |             | Suffix     |
| 1   |                            |               |             |                |                  |              |             |            |
| l,<br>Print F                             | ull Name of License Hold   | er            |             | /              | Contractor L     | icense # o   | r Certifica | ate #      |
| licensed in:                              | , he                       | reby certil   | y that I    | personally     | have kr          | nowledge     | e that      | the above  |
| named applicant has                       | the <b>EXPERIENCE</b>      | PERFORM       |             | WORK           | DESCRIBE         | D ON         | THE         | FOLLOWING  |
| PAGE, having performed H.                 | ANDS-ON work betv          | veen          |             | Month/Yea      | to               | Мо           | onth/Yea    | <br>r      |
| One year of full-time work                | = 2,000 hours (app         | oximately 1   | .67 hours a | a month)       |                  |              |             |            |
| HANDS-ON & FOREMAN/S                      | UPERVISOR CANNO            | Т ВЕ СОМВ     | INED AS A   | TOTAL BUT      | THEY MAY         | OVERLA       | P IN TII    | ME PERIODS |
| Hours HAN                                 | <u>DS-ON</u> (confirm requ | uired minim   | um hours    | on trades li   | st)              |              |             |            |
| Hours as a                                | ORFMAN/SUPFRVI             | SOR (if appli | cable)      |                |                  |              |             |            |
| License Holder Signature:_                |                            |               |             | Cor            | ntact Phone      | e #:         |             |            |
| STATE OF FLORIDA<br>COUNTY OF HILLSBOROUG | iH                         |               |             |                |                  |              |             |            |
| Sworn to (or affirmed) and su             | bscribed before me by      | means of      | physical p  | resence or 🕻   | online not       | arization,   | this        |            |
| day of(day) (m                            |                            |               | , by        |                |                  |              |             | <u> </u>   |
| (day) (m                                  | onth)                      | (year)        |             | (name of       | person affirmin  | g)           |             |            |
| Personally Known OR                       | Produced Identifica        | tion          | (5          | ignature of No | otary Public - S | State of Flo | orida)      |            |
| Type of Identification                    | Produced                   |               |             |                |                  |              |             |            |
|   |                            | —             | (Print,     | Type, or Stam  | p Commissior     | ed Name      | of Notary   | / Public)  |
| (Notary Seal)                             |                            | _             | (Commissio  | n Number)      |                  |              | (Expiratio  | on Date)   |



# Local Specialty and State Registered Verification of Construction Experience

Members of the Board are required to ascertain whether an applicant demonstrates the appropriate amount of hands-on experience to qualify for the Certificate of Competency (Contractor's License) in a trade.

In your own words describe what you know of the applicant's experience. Describe the type of <u>hands-on work</u> he/she performed. For example - describe the kind of buildings/structures/projects worked, scopes of work, commercial or residential, interior or exterior, application processes, materials used, phase of construction, etc. Give any details that might aid in evaluating his/her experience. <u>Attach additional notarized page(s) as necessary.</u>

| Print Full Name of License Holder              |                      | Contractor Lice               | Contractor License # or Certificate # |  |  |
|--|----------------------|-------------------------------|---------------------------------------|--|--|
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
|  |                      |                               |                                       |  |  |
| icense Holder Signature:                       |                      | Contact Pho                   | one #:                                |  |  |
| TATE OF FLORIDA<br>COUNTY OF HILLSBOROUGH      |                      |                               |                                       |  |  |
| worn to (or affirmed) and subscribed before me | by means of <b>[</b> | physical presence or Donline  | notarization, this                    |  |  |
| day of   |                      | , by                          |                                       |  |  |
| (day) (month)                                  | (year)               | (name of person affi          | rming)                                |  |  |
| 🗌 Personally Known OR 🔲 Produced Identifi      | cation _             |                               |                                       |  |  |
|  |                      | (Signature of Notary Publ     | ic - State of Florida)                |  |  |
| Type of Identification Produced                | -                    |                               |                                       |  |  |
|  |                      | (Print, Type, or Stamp Commis | sioned Name of Notary Public)         |  |  |
| (Notary Seal)                                  |                      |                               |                                       |  |  |



# Instructions for Hillsborough County Code Compliance Bond

The Code Compliance bond is required of all contractors working in Hillsborough County (not required of State Certified Contractors). Please ensure your bonding company completes all lines correctly.

- "Bond For" should be the classification of contractor (i.e. Building, General, Mechanical, Electrical, Plumbing, Gas, Specialty (specific trade), Swimming Pools, Roofing, Irrigation, etc.).
  NOTE: A separate bond is required for each license category/license held.
- 2. The principal of the bond ("That we") should have the complete name of the License Holder and the Company. Only one company name should be listed. If the contractor does not qualify a company and works as "individual", then the contractor's full name is acceptable. Bonds with only the company name will not be accepted. If the license holder qualifies a corporation or firm, the license holder must be an active officer of that corporation or firm, or must be its designated agent.

# **EXAMPLE OF PRINCIPAL ON BOND:**

John Doe

OR

John Doe / ABC Construction Inc. or John Doe dba ABC Construction Inc.

- 3. The second blank space in Paragraph 1 names the Surety Company providing the bonding.
- 4. The second blank space in Paragraph 2 must contain the same as indicated above in item 2.
- 5. The license holder must sign the bond. The name of license holder must be printed/typed on the line above signature line. The "company" is not the license holder.
- 6. All bonds are "Continuous" until cancelled. Hillsborough County Contractor Licensing must receive all notices of cancellation no later than 15 days prior to the effective date of cancellation.
- 7. The Surety (bonding) Company is to notify, in writing, the Hillsborough County Contractor Licensing at (813) 272-5600, when any claim is made on any bond, whether paid on or not.
- 8. All bonds must contain the seal of the surety company and be signed by the Attorney-in-Fact for the surety company. A Power-of-Attorney for the individual signing on behalf of the surety company shall be attached to all bonds.

# Hillsborough County Code Compliance Bond

| Bond for                                      | Contractor        | Bond #  |           |
|---|-------------------|---|-----------|
| Type of License Held                          |                   |   |           |
| Insurance Agency                              |                   | Phone #   |           |
| KNOWN BY ALL MEN THESE PRESENTS               |                   |   |           |
| That we,                                      |                   |   | _, and    |
| (License Holder's Name, if as Individual      |                   | e Holder's Name AND Company Name, if qualifying a Company)  |           |
| (Name e                                       | of Surety/Bonding | Company providing Bond)                                     |           |
| a corporate authorized to do business in th   | ne State of Flor  | ida (hereafter called Surety), are held and firmly bou      | nd unto   |
| , G   | overnor of the S  | State of Florida, and his successors in office, in the pena | al sum of |
| Five Thousand Dollars (\$5,000), the true pay | ment whereof      | well and truly to be made we do bind ourselves, our re      | spective  |
| heirs, executors, administrators, successors, | and assigns, joi  | intly and severally, firmly by this bond.                   |           |

| DATED THIS |     | DAY OF | , 20 |    |
|------------|-----|--------|------|----|
|            | Day | Month  | Yea  | ar |

The condition of this bond is such that if the above bound Principal, the said\_

Hillsborough

**County** Florida

All Information is to be Typed or Clearly Printed

shall protect all persons suffering any loss or damage occasioned by said Principal failing to comply with any of the provisions of any municipal or county code applicable to the work performed by said Principal or officer, employee or agent of said Principal, or under the direction and supervision of said Principal and shall, without additional cost to the person for whom any such work is performed, remedy all defects in said work due to faulty workmanship or material furnished or used by said Principal, and shall reconstruct any such defective work and will replace or make good any such defective material to the satisfaction of the inspector having jurisdiction of the class of work embraced in the Code applicable thereto, at any time within one (1) year after the performance of any such work by said Principal, his agents or employees, and within forty-eight (48) hours after notice from such inspector to reconstruct, replace or repair the same, then this obligation shall become null and void; otherwise to remain in full force and effect.

The failure or default on the part of the Principal in remedying any defects in such work due to faulty workmanship or incorrect construction or installation or due to faulty materials furnished or used by said Principal, shall give the person for whom such work is performed a right of action against the Principal and Surety under this obligation; provided, however, that no suit, action, or proceeding by reason of any default shall be brought on this bond after one (1) year from date of final completion of the work done by the Principal for any such person.

This bond shall be considered continuous until such time as notification of cancellation is furnished to the Hillsborough County Building & Construction Services, Construction Licensing Team. Cancellation must be received no less than fifteen (15) days prior to the cancellation effective date.

|  | Surety                         |
|--|--------------------------------|
| Printed/Typed License Holder's Name – NOT Company Name |                                |
|  | By                             |
| License Holder's Signature                             | Attorney-in-Fact Surety        |
|  | (AFFIX INSURANCE COMPANY SEAL) |



**1. Producer:** upper left corner of Accord 25 form must include the Insurance agency information:

# Name Address Phone number

2. Certificate Holder: lower left corner of Accord 25 form must read:

Hillsborough County Contractor Licensing 601 E. Kennedy Boulevard, 19th Floor P.O. Box 1110 Tampa, Florida 33601

# Must include BOTH the physical address & the P.O. Box # as shown.

- **3.** Contractor's Name (not company name) and license number must be shown in the "Description of Operations" box above the "Certificate Holder" box.
- 4. Out of State Companies: the following must be stated in the description box:

"Covers all employees in the State of Florida"