



City of Pompano Beach
Department of Development Services
Business Tax Receipt Division

Contractor Record Maintenance

100 W. Atlantic Blvd Pompano Beach, FL 33060
Phone: 954.786.4668 / 954.786.4633 Fax: 954.786.4666
Email: BusinessTaxReceipt@copbfl.com

NO PERMIT WILL BE ISSUED WITHOUT THE COMPLETION AND APPROVAL OF THIS APPLICATION.

Business name _____

Business street address _____

City _____ State _____ Zip _____

Email _____

Business phone _____ Number of Employees _____

Qualifier's name _____

Personal street address _____

City _____ State _____ Zip _____

Email _____

Personal phone _____

If you hold a Broward County Competency Card, the following items must be submitted:

- Broward County Certificate of Competency and State Registration (if applicable) (FS 489.115)
Liability and Worker's Comp Insurance, the City of Pompano Beach must be the certificate holder (City of Pompano Beach, P.O. Drawer 1300, Pompano Beach, FL 33061) (FS 489.114 and FS 489.115)
Worker's Comp Exemption (if applicable) (FS 440.10)

If you hold a State Certification, the following items must be submitted:

- State Certification (FS 489.115)
Liability and Worker's Comp Insurance, the City of Pompano Beach must be the certificate holder (City of Pompano Beach, P.O. Drawer 1300, Pompano Beach, FL 33061) (FS 489.114 and FS 489.115)
Worker's Comp Exemption (if applicable) (FS 440.10)

NOTE: For more than one qualifier, please complete one form for each qualifier. Same business name must be indicated on each document.