



City of
Umatilla
Florida

Contractor Registration Form

Contractor Information

Business Name: _____

Contractor Name (License Holder/Qualifier): _____

Business Address: _____

Email Address: _____ Business Telephone Number: _____

Business Fax Number: _____ Cell Phone Number: _____

License Information

Contractor Type: _____ Tax ID FEI/EIN Number: _____

License Number: _____ License Expiration Date: _____

Required Documents

Please attach copies of the following:

- State License General Liability Certificate of Insurance Workers Compensation Certificate or Exemption
 Driver's License of License Holder/Qualifier Any applicable Business Tax Receipts Sunbiz.org information

[All Insurance Certificates should list the City of Umatilla as the Certificate Holder or Additional Insured if applicable]

Signature of Applicant: _____

Date: _____

Printed Name: _____