



CITY OF NORTH PORT
Development Services Department
4970 CITY HALL BOULEVARD
NORTH PORT FL 34286

Phone (941) 429-7044 Email: bldginfo@northportfl.gov

CONTRACTOR REGISTRATION

- Copy of your state license
- Authorized Agent Form (for anyone doing permitting other than qualifier)
- Copy of the qualifier's driver's license
- Copy of current Worker's Compensation (or exemption)

- **PLEASE PROVIDE ALL REQUIRED DOCUMENTATION ALONG WITH THIS FORM**
- **PLEASE ALLOW 24-48 HOURS FOR PROCESSING**
- **PERMITS WILL NOT BE ACCEPTED UNTIL THE REGISTRATION PROCESS HAS BEEN COMPLETED**

Qualifier's Name (License Holder)	
Qualifier's (License Number)	
Owner's Name (Business Owner)	
Name of the Company	
Address: _____	
City, State: _____	
Zip: _____	
Phone No:	Email:
Qualifier's Drivers License #	State Issued: