



HOME OF PELICAN ISLAND
BUILDING DEPARTMENT
FIRE PREVENTION OFFICE

1225 MAIN STREET • SEBASTIAN, FLORIDA 32958
TELEPHONE: (772) 589-5537 FAX (772) 589-2566

PRIVATE PROVIDER REGISTRATION FORM

NO FEE IS REQUIRED FOR REGISTERING A PRIVATE PROVIDER FIRM

THE CITY OF SEBASTIAN PERMIT DISCOUNT IS 33.33% EACH FOR INSPECTIONS AND/OR PLANS REVIEW SERVICES

NAME OF PRIVATE PROVIDER FIRM: _____

BUSINESS ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

E-MAIL ADDRESS: _____ **PHONE:** _____

BEST CONTACT PERSON FOR PRIVATE PROVIDER: _____

E-MAIL: _____ **PHONE:** _____ **CELL:** _____

QUALIFYING AGENT FOR PRIVATE PROVIDER: _____

TITLE: _____ **FLORIDA LICENSE NO:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

QUALIFIER'S SIGNATURE _____ STATE OF
FLORIDA COUNTY OF The foregoing instrument was acknowledged before me this _____ day of
_____, 20__ by _____ who is ___ personally known or who
has ___ produced identification. Type of identification produced: _____

Official Signature of Notary _____

Public Notary Seal

THE FOLLOWING ITEMS NEED TO BE INCLUDED WITH THIS REGISTRATION FORM:

- SAMPLE COPY OF NOTICE TO BUILDING OFFICIAL OF USE OF PRIVATE PROVIDER
- NAMES AND PROOF OF LICENSURE FOR THE PERSONEL PROVIDING SERVICES (INCLUDE RESUMES AND/OR LIST OF QUALIFICATIONS)
- SAMPLE COPIES OF REQUESTS FOR CERTIFICATE OF OCCUPANCY, CERTIFICATE OF COMPLETION INSPECTION REPORTS AND/OR PLANS REVIEW AFFIDAVIT. AS APPLICABLE
- BUSINESS TAX RECEIPT FROM THE JURISDICTION THE BUSINESS IS LOCATED IN
- CERTIFICATE OF GENERAL LIABILITY INSURANCE PER FS 553.791(18) AND WORKERS COMPENSATION COVERAGE