

**City Of Clewiston**  
**Community Development Department**

121 Central Avenue Clewiston, Florida 33440  
Phone: 863-983-1500 • Fax: 863-983-1430  
[www.clewiston-fl.gov](http://www.clewiston-fl.gov)

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**VERIFICATION OF CONTRACTOR CERTIFICATION**

I hereby submit for a contractor verification in the category of:

\_\_\_\_\_

State Certification OR Registration #: \_\_\_\_\_

Qualifier's Name: \_\_\_\_\_

Business Legal Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Federal ID or S. S. # \_\_\_\_\_

**The following information must be submitted with EVERY permit application and returned before the permit can be issued.**

1. Copy of state **Certificate** or **Registration** or **Specialty** license
2. Copy of Local Business Tax Receipt from the city/county where the business is located.
3. Certificate of insurance made out to: The City of Clewiston, 115 West Ventura Avenue, Clewiston, Florida 33440
4. Copy of worker comp. policy or Exemption certificate, also made out to: The City of Clewiston, 115 West Ventura Avenue, Clewiston, Florida 33440

Qualifier's Signature: \_\_\_\_\_

Agent's Signature \_\_\_\_\_

Date: \_\_\_\_\_