

**Office of Planning and Development
Building Division
PO Box 9005, Drawer GM02
330 W. Church St.
Bartow, FL, 33831-9005
863-534-6530**



www.polkfl.gov/services/buildingcontractorlicensing@polkfl.gov

Private Provider Registration Form

Company Name: _____

Primary License Holder Name: _____

Phone Number: _____

Mailing Address: _____

Email Address: _____

Below is a list of items required for registering any private provider company with the Polk County Building Division. There is no registration fee assessed for private provider companies.

1. Copies of all licenses to be used for plans review or inspections
2. Copy of general liability insurance certificate OR professional liability insurance certificate with correct certificate holder (below).

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3. Copy of Accela Associated User Form: our optional form for the primary license holder to give additional permit applicants access to their license. We do not accept blanket power of attorneys. Permitting accounts for the applicants must be created at <https://aca-prod.accela.com/POLKCO/DEFAULT.ASPX> before the form is completed and submitted.

Please contact a Building official at (863) 534-6528 for a preliminary conversation regarding private providers working in unincorporated Polk County.