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

www.polkfl.gov/services/building
contractorlicensing@polkfl.gov

State Certified Registration Form

Company Name:_____

License Holder Name: _____

Phone Number: _____

Mailing Address: _____

Email Address: _____

Below is a list of items that are required to register any state certified license with Polk County Building Division. There is no registration fee assessed for state certified license holders.

1. Copy of Polk County's Contractor Construction Waste and Setback Acknowledgment form
2. Copy of general liability insurance certificate
3. Copy of workers' compensation insurance certificate or exemption in the license holder's name. **The Certificate holder portion of your insurance certificates must read as follows:**

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4. Copy of Accela Associated User Form (optional): for the license holder to give others access to apply for permits with their license.