



**Planning and Development Services
Building & Code Regulations**

2300 Virginia Ave, Fort Pierce, Florida 34982
Ph: 772-462-1672 or 772-462-1673
Website: www.stlucieco.gov
Email: contractor_licensing@stlucieco.org

LETTER OF RECIPROCITY REQUEST FORM

Instructions:

- Complete the form.
- Submit the fee of \$25.00 for each Letter of Reciprocity requested.
- Make all checks payable to: **St. Lucie County.**
- If paying by debit or with a credit card, you will be emailed a secure link to make your payment using our CSS portal.

YOUR REQUEST WILL BE PROCESSED AND SENT WITHIN TWO (2) BUSINESS DAYS

APPLICANT INFORMATION

(Please Print Clearly)

Date: _____

Qualifier's Name: _____

Company Name: _____

St. Lucie Comp. Card#: _____ Phone#: _____

Email: _____

MUNICIPALITY

City/County Name: _____

Address: _____

City/State/Zip: _____

EMAIL: _____ Phone: _____

Specify the type of exam(s) you are requesting the Letter of Reciprocity/Status for:

EXAM	Date	Score

Signature of Contractor/Journeyman

Date