

**BOARD OF
COUNTY
COMMISSIONERS**



Purchasing Division
2300 Virginia Avenue
Ft. Pierce, Florida 34982
Phone: (772) 462-1700
Facsimile: (772) 462-1704

**ST. LUCIE COUNTY APPRENTICESHIP PROGRAM
REGISTRATION FORM**

PLEASE TYPE OR PRINT CLEARLY:

Date Submitted: _____

Full Legal or Parent Company Name

Additional Company Name or "Doing Business As "

Physical Street Address of business

Mailing Address or P.O. Box Number

City, State & Zip

City, State & Zip

County: _____

Tax I.D. Number: _____

Contact Information:

Contact Name

Title

() _____
Company Phone Number

() _____
Company Fax Number

Please indicate trade(s) for which you are certified as an apprenticeship program with the State of Florida (i.e. electrician, plumber, roofer, carpenter, etc.)

CERTIFIED STATE OF FLORIDA REGISTERED TRADE(S)

Company Name: _____

To be considered a County-registered apprenticeship program, the following documentation is required:

- (1) Provide proof of certification of your apprenticeship program with the State of Florida
- (2) Current Valid License
- (3) Provide proof of having an educational facility located in St. Lucie, Martin, Indian River or Okeechobee Counties.

Address of educational facility: _____

City, State and Zip: _____

On County-funded construction projects which exceed \$300,000, contractors must have twenty (20%) of workers in specialty trades for which there are certified apprenticeship programs registered with the County. The purpose of this registration form is to provide a list of registered apprenticeship programs to be included in the bid documents for contractors interested in bidding County projects. No guarantee is expressed or implied that any work will be contracted as a result of the submittal of this registration.

ACKNOWLEDGEMENT:

Signature of Business Owner: _____

Print Name of Business Owner: _____

APPROVED FOR COUNTY REGISTRATION:

OMB Director

Date