

SUBCONTRACTOR AFFIRMATION

To be completed by the Qualifier working under the General Contractor, or by Owner-Builder as defined by Florida Statutes.

Permit Number	
Form Completed By: \square Qualifier \square Owner-Builder	
General Contractor for Project:	
Check One: ☐ Electrical ☐ Plumbing ☐ Roofing ☐ Mechanical ☐ Septi	c 🗖 Other
Jobsite Address:	
Qualifier Information (to be completed by the Qualifier)	
Name:	
Company Name:	
State License No.:	
Phone:	
Email:	
Acknowledgement: Knowingly providing false information to obtain a permit to practice construction contracting is a vio	olation of Florida Statute 489.129 and 489.533.
Signature and Notary Signature of Qualifier under General Contractor or Owner-Builder:	
Printed Name of Qualifier under General Contractor or Owner-Builder:	
State of County of	_
The foregoing instrument was acknowledged before me by means of ☐ physical presence, 20, by (printed name of owner or qualifier)	•
Such person(s) Notary Public must check applicable box:	Must Comply with Notarial Law
 □ Are personally known to me □ Has produced a current drivers license	Notary Seal
Notary Signature:	

Upload completed form to the portal under "conditions".

Subcontractor Affirmation 12.2.20 Page 1 of 1