



Department of Growth Management

SPECIALTY STRUCTURES CONTRACTOR

“Specialty Structures Contractor” means a contractor whose services are limited to the execution of contracts requiring the experience, knowledge and skill necessary for the fabrication, assembling, handling, erection, installation, replacement, dismantling, adjustment, alteration, repair, servicing and design work when not prohibited by law, in accordance with accepted engineering data and/or according to manufacturers specification in the aluminum, metal, canvas, vinyl and fiberglass screening, doors and windows, hurricane protection devices and allied construction materials. The scope of such work shall include and be limited to fabric coverings on metal substructures, screened porches, screened enclosures, pool enclosures, preformed panel-post and beam roofs, manufactured housing roof-overs, vinyl or acrylic panel window enclosures, guardrails, handrails, aluminum and vinyl fences, the installation or replacement of windstorm protective devices, single story self-contained aluminum utility storage structures not to exceed (720 sq. ft.), residential glass window and door enclosures, sunrooms, siding soffit, fascia and gutters. The installation or replacement of window and door assemblies certified in accordance with AAMA 101/I.S.2 or Miami Dade TAS 201.202.203 as specified by the Florida Building Code in Group R occupancy buildings, as defined by the Florida Building Code, up to three stories or thirty feet in height.

ALL APPLICANTS MUST BE 22 YEARS OF AGE OR OLDER

Okaloosa County requires applicants for State Registered or Local Specialty Licenses to appear before the appropriate competency Board for approval prior to testing.

Information Enclosed with Packet:

1. Board Dates and Deadlines
2. Credit Reporting Agency Approved List
3. Application for Board Approval Affidavit
4. Specialty Structures Contractor Experience Affidavit
5. Work History Affidavit
6. Acknowledgement of Exam/Licensure Deadline Affidavit
7. Aluminum Structures & Specialties and Business & Law Book List
8. Board Application Directions

Items required before Board appearance can be granted:

- ____ Credit Report** on yourself from a Department of Business and Professional Regulation approved credit report agency (list enclosed in packet);
- ____ Proof of satisfaction of liens, judgments, and discharge of bankruptcy, if applicable;
- ____ Application for Board Approval Affidavit;
- ____ Specialty Structures Contractor Experience Affidavit;
- ____ Employment History Affidavit;
- ____ Acknowledgement of Exam/Licensure Deadline Affidavit;
- ____ Copy of Driver License;
- ____ \$25 Board Processing fee (cash, check, money order, MasterCard, Visa or Discover credit/debit cards*) *additional fees applied to credit/debit payments

Credit reports must be mailed directly to Okaloosa County Department of Growth Management from the credit agency. **NOTE: Emailed credit reports will be accepted as long as they are sent directly from the credit reporting agency and can be verified.

PLEASE BE ADVISED: If the credit report is submitted along with the required documents, **THE ENVELOPE MUST BE SEALED.** If the envelope is opened, the credit report **WILL NOT** be accepted from the applicant.

If you are interested in obtaining your State Certified license, please call the Department of Business & Professional Regulation at **(850) 478-1395** or visit: www.myfloridalicense.com for information.

**1250 N. Eglin Parkway, Suite 301, Shalimar, FL 32579
812 E. James Lee Blvd, Crestview, FL 32539
(850) 651-7526**

PLUMBING, MECHANICAL & CONSTRUCTION BOARD DATES FOR 2018

Board	Board Meeting date	Applicant's deadline before Board meeting	Agenda's Due
Plumbing - 9am Mechanical - 10am Construction - 3pm	January 31, 2018	January 17, 2018	January 24, 2018
Plumbing - 9am Mechanical - 10 am Construction - 3pm	March 28, 2018	March 14, 2018	March 21, 2018
Plumbing - 9am Mechanical - 10am Construction - 3pm	May 30, 2018	May 16, 2018	May 23, 2018
Plumbing - 9am Mechanical - 10am Construction - 3pm	July 25, 2018	July 11, 2018	July 18, 2018
Plumbing - 9am Mechanical - 10am Construction - 3pm	September 26, 2018	September 12, 2018	September 19, 2018
Plumbing - 9am Mechanical - 10am Construction - 3pm	November 14, 2018	October 31, 2018	November 7, 2018

ELECTRICAL BOARD DATES FOR 2018

Board	Board Meeting date	Applicant's deadline before Board meeting	Agenda's Due
Electrical - 3pm	January 4, 2018	December 14, 2017	December 21, 2017
Electrical - 3pm	February 1, 2018	January 18, 2018	January 25, 2018
Electrical - 3pm	March 1, 2018	February 15, 2018	February 22, 2018
Electrical - 3pm	April 5, 2018	March 22, 2018	March 29, 2018
Electrical - 3pm	May 3, 2018	April 19, 2018	April 26, 2018
Electrical - 3pm	June 7, 2018	May 24, 2018	May 31, 2018
Electrical - 3pm	July 5, 2018	June 21, 2018	June 28, 2018
Electrical - 3pm	August 2, 2018	July 19, 2018	July 26, 2018
Electrical - 3pm	September 6, 2018	August 23, 2018	August 30, 2018
Electrical - 3pm	October 4, 2018	September 20, 2018	September 27, 2018
Electrical - 3pm	November 1, 2018	October 18, 2018	October 25, 2018
Electrical - 3pm	December 6, 2018	November 15, 2018	November 29, 2018



Department of Growth Management

Acknowledgement of Exam/Licensure Deadlines

Per Okaloosa County Construction Ordinance 07-32, Section 3-3 and Okaloosa County Electrical Ordinance 07-48, Section 3-3. Eligibility, Licensure by Examination:

*From **the date of Board approval**, an applicant shall have one (1) calendar year to have taken and scored a grade of at least seventy-five percent (75%) or above on the Standard Business and Law Exam and on an examination in the particular field for which the application is being made; to be prepared, proctored and graded by the approved testing agency. When the passing score is achieved the applicant shall proceed with application for State licensure. Upon receipt of a State license the applicant shall provide to the Department of Growth Management, the State License, business tax receipt, proof of general liability insurance, worker's compensation exemption/insurance and a hold harmless agreement to obtain a Certificate of Competency. The Department shall issue the Certificate of Competency when the above mentioned documentation is provided and all fees are paid in full.*

If an applicant fails to take the exam within the one (1) calendar year after Board approval, then the applicant will be required to reapply to the appropriate Board for re-approval.

Per Okaloosa County Construction Ordinance 07-32, Section 3-12 and Okaloosa County Electrical Ordinance 07-48, Section 3-11. Undeclared Exam Applicants:

Applicants must declare "active" status in Okaloosa County within twelve (12) months from date of notification of passing the examination. If active status is not declared within one (1) year from the date of the original notice, the applicant must appear before the Board for approval to retake the examination.

By signing this affidavit, I understand that I will have one (1) calendar year from the date of Board approval to take and pass the appropriate exams. I further acknowledge that if I fail to complete the requirements, I will be required to reapply as a new applicant in order to obtain re-approval.

I understand once I have passed the required exams, I have twelve (12) months from the exam notification date from the Growth Management Department to declare "active" status in Okaloosa County.

Applicant's Signature

Date Signed

NOTARY INFORMATION:

State of _____ County of _____

The above applicant, whose name is _____
personally appeared before me and is known by me OR has produced the following
identification _____
on this ____ day of _____, 20____.

Notary's Signature

Commission Expires

SEAL:



Prov
 13614 Progress Blvd
 Alachua FL 32615-9496
 Telephone: (866) 720-7768

Website: arkiv.provexam.com

You have received this email in response to your request for Exam Information for Okaloosa County. The information below describes the examination you expressed interest in taking. To receive more general information about the testing program, you may click on the "Candidate Information Bulletin" link below to download a candidate bulletin that provides more detailed information about the testing rules and processes.

[Candidate Information Bulletin](#).

Aluminum Structures & Specialties

Number of Questions	50
Time allowed (hours)	2
Subject Area	# Quest.
Plan Reading & Estimating	8
Concrete & Masonry	7
Carpentry, Windows & Doors	7
Siding, Soffit & Fascia	5
Screen Enclosures	6
Screen Rooms, Carports & Patio Covers	6
Miscellaneous Aluminum Structures & Gutters	6
Safety	5

References

AAF Guide to Aluminum Construction in High Wind Areas, 2010. Aluminum Association of Florida, 13165 McCrory Place, Suite 185, Orlando, FL 32832. Available at <http://www.aaof.org/>. (Also permitted is the Guide to Aluminum Construction in High-Wind Area ASCE7 Supplement to the 2010 Guide)

ASTM D4756-06 Standard Practice for Installation of Rigid PVC Siding & Soffit, 2006. American Society for Testing and Materials, 100 Barr Harbor Drive, P.O. Box C700, West Conshohocken, PA 19428-2959. Available at <http://www.astm.org/>. Candidate printed versions allowed if exam is open book.

Basic Safety, 2009. ISBN: 978-0-136-09875-1. Prentice Hall, P.O. Box 11071, Des Moines, IA 50336. Available at www.provbookstore.com or <http://nccer.pearsonconstructionbooks.com>.

Florida Building Code 5th edition - Building, 2014. ISBN: Item #:5601L14. International Code Council, 4051 West Flossmoor Road, Country Club Hills, IL 60478. Available at www.iccsafe.org.

Masonry and Sitework for the Residential Contractor, 2nd edition, 2nd. ISBN: 978-1-269-78556-3. Pearson, 501 Boylston Street, Suite 900, Boston, MA 02116. Available at www.provbookstore.com

Study Guide for Residential Carpentry & Repair, 2nd edition, 2014. ISBN: 978-1-269-78561-7. Pearson, 501 Boylston Street, Suite 900, Boston, MA 02116. Available at www.provbookstore.com

**OKALOOSA COUNTY DEPARTMENT OF GROWTH MANAGEMENT
APPLICATION FOR COMPETENCY BOARD APPROVAL**

APPLICANT’S NAME: _____ DOB: ____/____/____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

WORK PHONE: (____) _____ HOME PHONE: (____) _____

MOBILE PHONE: (____) _____ FAX: (____) _____

EMAIL ADDRESS: _____

TYPE OF TRADE: _____

_____ Credit Report for Applicant

_____ Work History Affidavit

_____ Experience Affidavit for Applicant

_____ **\$25** fee

Receipt No: _____ Total Paid: _____ Staff Initials _____

_____ Have you ever been convicted of a felony?
YES or NO

_____ Have you ever been party to an entity that has been in any form of the construction business?
YES or NO

If “yes”, please state the name(s) of all entities with which you are or have been associated:

_____ Have you ever had a court judgment rendered against you that remains unsatisfied?
YES or NO

_____ Have you ever filed for bankruptcy protection in any state?
YES or NO

_____ Have you ever lost any license due to failure of the licensee to pay any debt, or failure to abide by the requirements of the license?
YES or NO

If you answer “yes” to any of the above three (3) questions, please attach an explanation.

_____ If applying for Class A, Class B or Master Mechanical license, do you currently hold an EPA card allowing you to handle refrigerants?

_____ If you have done business in any form of construction or building in any other state, please disclose the state or states in which you were involved:

_____ Drivers License

Affidavit of Applicant: I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief.

Applicant’s Signature

Date Signed

NOTARY STATE OF _____, COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, 20____ By _____

Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____

Notary Signature _____

SEAL:

OFFICE USE ONLY

MEETING DATE: _____

MOTION MADE BY: _____ SECONDED BY: _____

VOTE: _____

**Prov**

13614 Progress Blvd
Alachua FL 32615-9496
Telephone: (866) 720-7768

Website: arkiv.provexam.com

You have received this email in response to your request for Exam Information for Okaloosa County. The information below describes the examination you expressed interest in taking. To receive more general information about the testing program, you may click on the "Candidate Information Bulletin" link below to download a candidate bulletin that provides more detailed information about the testing rules and processes.

[Candidate Information Bulletin.](#)

Business and Law

Number of Questions	50
Time allowed (hours)	2
Subject Area	# Quest.
Business Organization	2
Licensing	3
Lien laws	2
Tax Laws	5
Safety OSHA	3
Labor Laws	8
Contract Management	9
Project Management	6
Estimating & Bidding	4
Financial Management	5
Risk Management	3

References

FLORIDA - NASCLA Contractors Guide to Business, Law and Project Management , 1st. ISBN: 1-934234-92-3 OR 978-1-934234-92-1. NASCLA, 23309 N. 17th Drive, Building 1, Unit 110, Phoenix, AZ 85027. Available at www.nascla.org or www.provbookstore.com. Please note, the Florida Business and Law Study Guide for Contractors (published by Prov) is permitted as a substitute.

FLORIDA CONSTRUCTION INDUSTRY LICENSING BOARD

Credit Reporting Agencies – For Reference Only

(This listing is **not all inclusive**. You may submit credit reports from agencies not included on this list, so long as they meet the criteria listed in 61G4-12.011(12), Florida Administrative Code.)

DBPR cannot recommend or endorse a particular credit reporting agency. The list provided below includes the agencies that we are aware of that currently meet the Board's reporting requirements. It is provided solely as a courtesy to assist you in locating resources. The Department specifically disclaims any responsibility for the quality or cost of services provided by the agencies listed below.

Note to Applicants: Effective April 10, 2012, personal credit reports must contain a FICO derived credit score to meet application requirements. It is the applicant's responsibility to ensure the credit reporting agency includes the FICO derived score on the credit report submitted to DBPR.

1st United CRS dba

www.unitedcrs.com
PH 239.206.1049
PH 850.539.8000
PH 215.501.7224

A & A Credit Corp.

AAA Advantage Credit Services
PH 877.296.4600

API Processing - Licensing, Inc.

www.apiprocessing.com
PH 954.567.0013
PH 800.947.6939

Associated Credit Reporting, Inc.

www.associatedcreditreporting.com
PH 754.216.0025
PH 800.676.7640 (ext. 201)

AVS Screening

PH 850.862.2134

Background Research, Inc.

CBJ Associates Inc.

PH 904.723.5533

Check Mate

PH 941.366.1819

Contractor Licensing Inc.

Contractors Reporting Service

PH 800.487.2084

Credit Bureau of Escambia County

Credit Bureau Services, Inc.

dba www.elicensereport.com
PH 954.561.1400

Credit, Business, & License Solutions dba

www.dbprcreditreport.com
PH 800.600.2155

Credit Check, Inc.

www.creditcheckinc.com
PH 561.616.5556
TOLL FREE 877.616.5556

Credit Plus, Inc.

PH 818.331.1048

Credit Profile & Security Corp.

Credit Search

PH 561.791.9458

Dragnet Credit & Tenant Screening

PH 386.676.7733

Licenses, Etc.

www.licensesetc.com
PH 239.777.1028
PH 954.573.2700

License Exam Services LLC

PH 941.706.2336

Lumbermen's dba

www.FloridaCreditReports.com
PH 954.771.2100
PH 813.358.7633
PH 407.956.2237
TOLL FREE 800.496.4826

MacData Inc.

Merchant's Association

Merit Credit

www.meritcreditservices.com
PH 239.277.3202
TOLL FREE 800.371.3348

NACM Tampa Inc.

Contact: Cassie Thomas
cthomas@nacmtampa.com
PH 800.352.5882, Ext 292

NACM South Atlantic

www.nacmsouthatlantic.com
PH 407.299.7491, Ext 115
TOLL FREE 800.393.6226

National Research Group

PH 941.488.8500

Network Credit Services

PH 813.685.5678

Premium Credit Bureau

PH 305.468.1560

Supreme Credit Information Services

www.supremebureau@comcast.net
PH 786.266.1407
FAX 305.665.3315

USA Credit Bureau

PH 888.474.2270

Updated: 1/18/18

Okaloosa County
Specialty Structure Contractor Experience Affidavit

Applicant Name: _____ DOB ____/____/____
Address: _____
City _____ State: _____ Zip Code: _____
Telephone: (Home) _____ (Work) _____

Okaloosa County Ordinance 07-32, requires Specialty Structure Contractor to have Four (4) years of Construction related experience in this trade.

For the purpose of experience requirements, a minimum of 2,000 man-hours shall be used in determining one (1) year of work experience, per Okaloosa County Ordinance 07-32.

Educational Credit: A Bachelor’s degree in a related field from an accredited institution shall be equal to three (3) years experience; a Bachelor’s degree in a non-related field shall be equal to two (2) years experience; an Associates degree in related field from an accredited institution shall be equal to one (1) year of experience. A copy of official college transcripts/diplomas must accompany this application.

Table with 2 columns: License Applying For, Licensed Individuals Authorized to Sign Experience Affidavit. Row 1: Specialty Structure Contractor, Specialty Structure Contractor, General, Building or Residential Contractor or Building Official

NOTE: MISREPRESENTATION OF INFORMATION ON THIS APPLICATION MAY RESULT IN DENIAL OF THIS APPLICATION. I understand DIRECT KNOWLEDGE does NOT mean I am relying on a statement from the applicant that he/she has met the requirements. Furthermore, knowingly providing false or misleading information and/or committing forgery may be subject to criminal penalties, including, but not limited to those set forth in chapter 817, Florida Statutes and chapter 831, Florida Statutes.

-----VERIFICATION INFORMATION-----
THIS SECTION TO BE COMPLETED BY PERSON VERIFYING EXPERIENCE

This is to verify that the applicant has four (4) years of proven experience in the field they are applying for.

Print Name of Contractor Verifying Experience _____ Signature _____
Address _____ State License # _____ Telephone Number _____

I certify that the above information is true and correct this _____ day of _____ 20____.

Signature of person verifying experience _____ I further acknowledge that I have not knowingly provided false or misleading information.

STATE OF: _____ COUNTY OF: _____

The above license holder, whose name is _____, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this ____ day of _____ 20 ____.

Notary’s Signature _____ My Commission Expires _____



Okaloosa County

Department of Growth Management

Licensing Department

Specialty Structures Contractor Board Application Directions

This is to assist you in completing your application to appear before the Construction Competency Board in obtaining approval for testing and Okaloosa County Competency Card:

Application for Competency Board Approval Affidavit #51-0707:

- a. Complete Name, date of birth, address, phone/fax numbers, email address and type of trade applying for (i.e. Residential Contractor, Roofing Contractor, Electrical Contractor, etc.);
- b. Circle 'Yes' or 'No' for each of the questions listed on the form.
 1. If answer '**yes**' to felony, you will be required to provide the following:
 - a. Date of offense;
 - b. Type of offense charged with;
 - c. Time Served, if any;
 - d. Complete description of charge'
 - e. State felony was in;
 2. If answer '**yes**' to judgment, you will be required to provide the following:
 - f. Proof that judgment has been satisfied;
 - g. Proof payment plan is in place;
 3. If answer '**yes**' to bankruptcy, you will be required to provide the following:
 - h. Provide copy of Discharge of Bankruptcy;
 4. If answer '**yes**' to loss of license due to debt or license requirements, you will be required to provide:
 - i. Written explanation
- c. Applicant must sign form and his/her signature must be notarized.

Credit Report:

The report must be provided from one of the agencies listed on the Credit Reporting Agency Approved List. The credit report can be submitted as follows:

1. Mailed from the credit reporting agency to:
Okaloosa County Dept. of Growth Mgmt.
812 E. James Lee Blvd
Crestview, FL 32539
2. By applicant at the time packet is submitted; Envelope MUST be sealed;
3. Emailed from the credit reporting agency to: rlucas@myokaloosa.com

Proof of Satisfaction of Liens, Judgment or Discharge of Bankruptcy, if applicable:

Applicant will be required to submit proof that all liens or judgments have been satisfied or payment plan is in place or provide a copy of the discharge of bankruptcy

Specialty Structures Contractor Experience Affidavit #56-0707:

1. Applicant must complete their name, address, contact number(s) and date of birth;

If using a Bachelor's Degree or Associates Degree, it must be issued by an accredited college/university

2. A licensed contractor* who holds a current and active state license in the fields listed must sign the affidavit and their signature must be notarized.

*If the contractor signing the affidavit is licensed outside of the State of Florida, please make him/her aware that Licensing Staff will be contacting them as required by the Competency Boards

Work History Affidavit #52-0707:

1. Complete your name, address and contact number(s);
2. Complete employer/company name;
3. Complete position held with company;
4. Complete length of time employed showing starting (month/year) and ending or current (month/year)
5. Type of work/duties performed – please be as descriptive as possible. May use additional paper if needed.
6. Signature of Applicant must be notarized;

Acknowledgement of Exam/Licensure Deadline Affidavit #57-0913:

Applicant must sign affidavit and his/her signature must be notarized

NOTE: All forms submitted must be an original.

OKALOOSA COUNTY
Work History Affidavit

Name of Applicant
Home Address
Home Phone Work Phone Mobile Phone

WORK EXPERIENCE:
Must be listed in chronological order, starting with the most current employment. You may attach additional sheets if necessary in order to give complete and detailed information.
ALL RELEVANT EXPERIENCE IN THE FIELD IN WHICH YOU ARE APPLYING FOR MUST BE SHOWN AND MUST BE LEGIBLE.

EMPLOYER YOUR TITLE
EMPLOYER ADDRESS
START DATE (Month/Year) END DATE (Month/Year) SUPERVISOR'S NAME
YOUR SPECIFIC DUTIES

EMPLOYER YOUR TITLE
EMPLOYER ADDRESS
START DATE (Month/Year) END DATE (Month/Year) SUPERVISOR'S NAME
YOUR SPECIFIC DUTIES

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YOUR SPECIFIC DUTIES

EMPLOYER YOUR TITLE
EMPLOYER ADDRESS
START DATE (Month/Year) END DATE (Month/Year) SUPERVISOR'S NAME
YOUR SPECIFIC DUTIES

Applicant Signature Date

STATE OF COUNTY OF

The foregoing document was acknowledged before me this day of , 20
By
Who is personally known by me or produced the following identification

Signature of Notary Public

SEAL: