



Contractor's Registration Form
(Please Print)

(All contractors that are not State-Certified must be registered with Monroe County, prior to registering with The City of Marathon)

Business Name: _____

Phone: _____ Fax: _____

Email: _____

Physical Address: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Qualifier Name: _____ Signature: _____

Cell Phone: _____ Alt Phone: _____

Address: _____
Street City State Zip

Agent: _____ *Notarized Agent Letter signed by Qualifier must be provided*

Cell Phone: _____ Alt Phone: _____

Address: _____
Street City State Zip

Please Provide Up To Date Copies Of The Following:

1. **ANY LICENSE PERTAINING TO WORK BEING DONE** (State of Florida, Monroe County, Etc.)
2. **OCCUPATIONAL LICENSE OR BUSINESS TAX**
3. **CERTIFICATE OF INSURANCE FOR GENERAL LIABILITY. THE CERTIFICATE MUST NAME THE CITY OF MARATHON AS THE CERTIFICATE HOLDER.**
4. **WORKERS COMPENSATION OR EXEMPTION (If Exempt, Exemption Affidavit is required and can be obtained online or at City Hall.)**

Please provide the above information by 1) Bringing it directly to City Hall (notary services are available), 2) Mailing it to the address listed below, or 3) Emailing to inspections@ci.marathon.fl.us