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VILLAGE OF PINECREST
 Department of Building and Planning

Village of Pinecrest Contractor Registration and Verification Form

- Copy of your Florida Contractors License
- Copy of Local Business Tax
- Copy of your Certificate of General Liability Insurance
- Copy of your certificate of Workers Compensation Insurance or Exemption
- Copy of your Driver License

Contractor and Registrar Information

State of Florida License No.	Expiration Dade	Trade Category	
Qualifier Last Name	Qualifier First Name	Middle Initial	
Business Name			
Business Address	City	State	Zip Code
Business Phone	Mobile Phone		
Driver's License No.	Email		
Other License No. (optional)	Expiration Date	Trade Category	
Other License No. (optional)	Expiration Date	Trade Category	

To register and update your licenses please email: RENEWALS@PINECREST-FL.GOV

Please select a pin/password for your portal – your pin has to be **4 digits** and cannot start with 0.

PIN/PASSWORD: _____

 Signature of Qualifying Agent

STATE OF FLORIDA, COUNTY OF MIAMI-DADE COUNTY

Sworn to and subscribed before me that this is a true statement this _____ day of _____ 20____

My Commission Expires _____

NOTARY PUBLIC _____

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