



DEVELOPMENT SERVICES

Building Division · 504 Greynolds Circle · Lantana, FL 33462
(561) 540-5780 · BuildingPermit@Lantana.org

CONTRACTOR REGISTRATION FORM

Business Details

Doing Business As _____

Business Mailing Address _____

City, State, Zip _____

Business Phone: _____ Business Email: _____

Type of Business Performed _____

Owner's Name _____

Certification Number _____ (attach a copy)

Please check below to confirm the following items are attached:

- State License or Competency
- County BTR (from your Local County)
- Liability Insurance with Town as certificate holder
- Worker's Comp with Town as certificate holder

By signing this application, I agree to abide by all ordinances, rules, and regulations pertaining to this subject, now or hereafter passed by Lantana Town Council or by any official empowered to issue such regulations.

Contractor Signature

Date