

DATE OF APPLICATION \_\_\_\_\_

HIGHLANDS COUNTY BUILDING DEPARTMENT  
APPLICATION FOR REGISTRATION

**Reciprocity**

OFFICE USE ONLY

LICENSING BOARD:

Meeting Date: \_\_\_\_\_ Approved: 9 Not Approved: 9  
Block Exam: \_\_\_\_\_ Exam Date: \_\_\_\_\_ Exam Grade: \_\_\_\_\_  
Location: \_\_\_\_\_ Business & Law: \_\_\_\_\_

**APPLICANT INFORMATION**

Category: \_\_\_\_\_  
Trade Years of Experience

Applicant's Name: \_\_\_\_\_

Residential Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Res. Phone: \_\_\_\_\_ D.O.B. \_\_\_\_\_ S.S. # \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ FEID: \_\_\_\_\_

Applicant's signature

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_ by \_\_\_\_\_ who is personally  
known to be or produced \_\_\_\_\_ as identification.

Notary Public