

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
FARM LABOR REGISTRATION AND TESTING**

**ADDENDUM TO APPLICATION FOR A FARM LABOR CONTRACTOR
CERTIFICATE OF REGISTRATION**

Check only one of the following requests:

- \$125.00 Renewal Application for Registration
- \$160.00 Application for Examination and Registration
- \$ 35.00 Application for Re-Examination Only

Payment must be in the form of a money order/certified check payable to DBPR – Farm Labor

You can apply as an Individual or a Company, but not both:

Individual Name: _____ **SSN:** _____

Company Name: _____ **FEIN:** _____

Registered Agent Information:

_____ (Name) _____ (Phone)

_____ (Address) _____ (City) _____ (State) _____ (Zip)

I certify that the above referenced individual has been informed and agrees to act as my agent to receive service of process and other official or legal documents as outlined in 450.31(1)(e), Florida Statutes. I understand that this agent must be available to accept service during regular business hours, Monday through Friday.

_____ (Signature of Applicant) _____ (Date)

REQUEST FOR EXAMINATION

(CHECK ONLY ONE)

LANGUAGE	WRITTEN	ORAL
ENGLISH		
SPANISH		
HAITIAN/CREOLE		

Please indicate if you require special accommodations due to disability or religion: Yes No
If Yes, please explain: _____