



Pasco County Building Construction Services
Contractor Licensing
8731 Citizens
Drive, Suite 230
New Port Richey, FL 34654
(727) 847-8009
contractorlicensing@pascocountyfl.net

FINANCIAL QUESTIONNAIRE & STATEMENT FORM

All applicants for a Certificate of Competency shall include the following:

- B. A complete **Financial Statement**, dated within thirty (30) days prior to the application, showing assets and liabilities of the individual – **not a business**. Pasco County requires an applicant to demonstrate a minimum net worth of \$20,000.00, except for the following contractors who must demonstrate a minimum net worth of \$10,000.00: Aluminum Contractor (Structural), Aluminum Specialty Contractor, Concrete Contractor, Masonry Contractor, Sign Contractor (Electrical), Sign Contractor (Non-Electrical), Structural Steel Contractor, Irrigation Sprinkler Contractor, Solar Energy Installation Contractor, Drywall Contractor, Tile, Marble, and Terrazzo Contractor, Insulation Contractor, Carpentry Contractor, Finish Carpentry Contractor, Plastering and Stucco Contractor, Glass and Glazing Contractor, Hurricane Protection Contractor, Garage Door Contractor, Marine Contractor, Painting Contractor, and Demolition Contractor.
- C. The credit report submitted will be reconciled with the Financial Statement.
 - 1. The Application for Certificate of Competency must be approved by the Building Official (or his designee) prior to any testing authorizations.
 - 2. Examinations are administered by an authorized independent testing agency.
 - 3. All fees for testing are paid directly to the testing agency by the applicant. You will be given all information on testing and re-testing.
 - 4. Test Requirements: A passing grade of 70 percent minimum or re-testing shall be required.

FINANCIAL RESPONSIBILITY: DEFINITION/GROUNDS FOR DENIAL

Pasco County Code Section 18-70 Requirements to apply for and/or obtain a Certificate of Competency from Pasco County.

18-70 (1) (c) Proof of financial stability, Pasco County will require a financial statement and will require the applicant to pay a fee and sign consent forms for a credit report from a nationally recognized credit agency that (a) obtains credit information both within and outside the State of Florida, (b) validates, updates, and maintains the accuracy of credit information obtained, and (c) obtains credit reports from at least two (2) credit bureaus. Any applicant who has a history of bankruptcy may be required to provide a creditor matrix and proof of final discharge or judgment. Any applicant who has had a lien or a court judgment against him or her may be required to provide a copy of the petition, judgment, lien, and proof of satisfaction or current repayment plan. Financial stability refers to the ability to safeguard the public from economic loss resulting from a contractor's inability to pay his lawful obligations under the contract. The grounds, upon which the building official may deny a certificate of competency for lack of proof as to financial stability, include the following:

- (i) Failure to submit the required credit reports, creditor matrix, judgments, lien information, or other information requested by the Building Official.
- (ii) Failure to answer the application questions truthfully and completely.
- (iii) Evidence that the applicant has filed voluntary or involuntary bankruptcy within the five (5) years preceding the application, resulting in a loss to consumers or creditors with whom the applicant conducted business as a contractor.
- (iv) The existence, within the ten (10) years preceding the application, of an unsatisfied court judgment rendered against the applicant based upon the applicant's failure to pay just obligations to parties with whom the applicant conducted business as a contractor.
- (v) An unfavorable credit report or history as indicated by any of the documents submitted.
- (vi) A determination by the building official that the applicant lacks the financial stability necessary to assure compliance with the standard set forth in this section. As guidelines for the determination of financial responsibility the building official will consider the applicant's response to the questions set forth in the application.
- (vii) Failure to demonstrate a minimum net worth of \$20,000.00 except the following contractors, who must demonstrate a minimum net worth of \$10,000.00: Aluminum Contractor (Structural), Aluminum Specialty Contractor, Concrete Contractor, Masonry Contractor, Sign Contractor (Electrical), Sign Contractor (Non-Electrical), Structural Steel Contractor, Irrigation Sprinkler Contractor, Solar Energy Installation Contractor, Drywall Contractor, Tile, Marble, and Terrazzo Contractor, Insulation Contractor, Carpentry Contractor, Finish Carpentry Contractor, Plastering and Stucco Contractor, Glass and Glazing Contractor, Hurricane Protection Contractor, Garage Door Contractor, Marine Contractor, Painting Contractor, and Demolition Contractor.

FINANCIAL STATEMENT

First and Last Name
Address
City, State Zip Code
Telephone Number
Year of Birth
Last Four of SSN
Name of Company You Intend to Qualify
Email Address

ASSETS		LIABILITIES	
Current Assets	AMOUNT	Current Liabilities	AMOUNT
Cash in Bank:	\$	Credit Cards Payable:	\$
Other Current Assets-Itemize:		Bank Loans Payable:	
		Mortgage Payable:	
		Real Estate Taxes:	
		Past Due Income Taxes:	
		Other Current Liabilities:	
TOTAL CURRENT ASSETS	\$	TOTAL CURRENT LIABILITIES	\$
Land:		Other Liabilities-Due After 1 Year:	
Home:		TOTAL LIABILITIES:	\$
Vehicles (Auto/Truck/TV, etc.)		<i>(Subtract Liabilities from Assets to get Net Worth)</i>	
Other Assets - Itemize:		NET WORTH:	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$

PLEASE NOTE: "Total Assets" must equal "Total Liabilities and Net Worth"

The undersigned certifies that the information submitted herein is true and correct.

BY: _____ Date: _____
Signature

Please explain any "YES" answers below.

❖ **Answer the following questions concerning financial stability.**

1. Has any bonding or surety company ever completed or made financial settlement upon any construction contract or work undertaken by the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder? Yes No
2. Are there any unpaid past-due bills or claims for labor, materials, or services as a result of the construction operations of the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder? Yes No
3. Are there now any liens, suits, or judgments of record pending or recorded against the applicant, or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder? Yes No
4. Are there now any liens of record by the U.S. Internal Revenue Service or the State of Florida Corporate Tax Division against the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder? Yes No
5. Has the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder been adjudicated as bankrupt within the past five (5) years or is any such person or organization presently in the process of bankruptcy proceedings? Yes No
6. Has the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder ever made an assignment of assets in settlement of construction obligations for less than the total amount of indebtedness? Yes No
7. Has the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder been convicted of acting in the capacity of a contractor without a license, or if licensed as a contractor in this or any other state, have disciplinary action (including probation, fine, or reprimand) ever been taken against such license by a state, county, or municipality? Yes No
8. Has the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder ever been convicted of any offense in this State or elsewhere, other than traffic violations? Yes No
9. Has the applicant or any business organization qualified by the applicant, or business organization in which the applicant was a partner, member, officer, or shareholder ever been convicted of any crime, adjudged bankrupt, or refused a fidelity bond? Yes No
10. Required signatures: If an individual: the applicant. If a partnership: the applicant and the partner. If a corporation: the applicant, president, vice-president, and secretary, or all other officers and/or members.

If any answer is yes, explain fully on a separate statement in your own words and attach the statement to this application.

APPLICANT:

Signature

Date

NOTE: If this application requires a test, test information will be given to you for the category that you selected on the front of this application, at the time it was issued to you. All tests and all fees for testing are paid directly to the testing agency. You will be sent an approval letter with an Examination Registration Form, Examination Schedule, Test and Review Center Codes, and instructions for filling out the Examination Registration Form **if** your Application for Certificate of Competency has been approved.

I HAVE ANSWERED BOARD QUESTIONS ON FINANCIAL STABILITY AND NET WORTH. I hereby declare that all information submitted herein is correct and true to the best of my knowledge and I authorize the Development Review Services Department to investigate any or all of the statements and information which I have submitted, or will submit, in connection with this application.

Signature of Applicant

STATE OF FLORIDA
COUNTY OF PASCO

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of _____, 2020, by _____.

(Signature of Notary Public - State of Florida)
(Print, Type, or Stamp Commissioned Name of Notary Public)

_____ Personally Known OR _____ Produced Identification
Type of Identification Produced _____

PLEASE NOTE: This application will **expire six (6) months** from the received date if a Certificate of Competency has not been issued.