

**TOWN OF ORCHID**  
7406 US Highway 1  
Vero Beach, FL 32967  
Phone 772-569-7686 Fax 772-569-7688

**WORK REGISTRATION APPLICATION**

For October 1, 2009 – September 30, 2010

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

Principal/Owner's Name: \_\_\_\_\_

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

\_\_\_\_\_

Business Telephone Number: \_\_\_\_\_

Business Fax Number: \_\_\_\_\_

Business E-mail Address: \_\_\_\_\_

Type of Services Provided: \_\_\_\_\_

\_\_\_\_\_

Please provide copies of the following current documents:

- Local, state or federal license for 2010
- Certificate of Insurance\* for General Liability
- Certificate of Insurance\* for Workers' Compensation or State of Florida Certificate of Exemption
- Payment of \$20.00 processing fee

\*To ensure that the Town of Orchid receives renewal and cancellation notification, please request that the Town be listed as a certificate holder on Certificates of Insurance.

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**DUE TO A CHANGE IN TOWN POLICY, DECALS WILL NO LONGER BE ISSUED AT THE ORCHID TOWN HALL. DECALS CAN BE OBTAINED AT ANY OF THE THREE ORCHID ENTRANCES.**