

DBPR HR-5023-076 – Affidavit Verifying Elevator Work History for Certificate of Competency Applicants

**STATE OF FLORIDA, DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
Division of Hotels and Restaurants, Bureau of Elevator Safety
2601 Blair Stone Road, Tallahassee, FL 32399-0783**

**Phone: 850.487.1395 – Email: dhr.elevators@myfloridalicense.com
Internet: www2.MyFloridalicense.com/elevator-safety/**

Please direct questions about this affidavit to the Department of Business and Professional Regulation's Customer Contact Center at 850.487.1395.

Affidavit Verifying Elevator Work History

I, _____, acting as agent of the below named registered elevator company,

do hereby attest that _____, has 4 or more years work experience constructing, maintaining, servicing and repairing elevators as required by Chapter 399, Florida Statutes, and Chapter 61C-5, Florida Administrative Code (FAC)

Registered Elevator Company (REC) _____

REC License # _____

REC License Expiration Date _____

Signature of Agent _____

Printed Name of Agent _____

CC/CET License Number (optional) _____

Date _____

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ , by

_____, who is personally known to me or who has produced

_____ as

identification and who has taken an oath.

Notary Public, State of Florida

Printed Name

Commission Number:

My Commission Expires:

Complete this affidavit and submit it with the application, other supporting documentation and required fee to the address on this form. Please use the entire 9-digit zip code in the address above to ensure proper handling.