

SEMINOLE TRIBE OF FLORIDA

TRIBAL COMMUNITY DEVELOPMENT
HARRIS HAMID, P.E.
Executive Director

ERIC WOODS MCP, CBO
Director / Building Official
Tribal Inspectors Office
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MARCELLUS W. OSCEOLA, JR., Chairman
MITCHELL CYPRESS, Vice Chairman
ANDREW J. BOWERS, JR., Brighton Councilman
CHRISTOPHER OSCEOLA, Hollywood Councilman
MANUEL M. TIGER, Big Cypress Councilman
LAVONNE ROSE, Secretary
PETER A. HAHN, Treasurer

CONTRACTOR'S REGISTRATION

Please print clearly

Company Name: _____
(as it appears on the State license)

Company Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone:() _____ Business Fax No:() _____

Contact Name: _____ Email: _____

Qualifier's Name: _____

PLEASE SUBMIT A COPY OF THE FOLLOWING

STATE OR COUNTY LICENSE /CERTIFICATION
GENERAL LIABILITY
WORKERS COMPENSATION

The certificate must name **The Seminole Tribe of Florida, 6300 Stirling Road, Hollywood, FL 33024** as the certificate holder and as additional insured. The additional insured needs to be included in the description box on the certificate and also by separate endorsement.