



CITY OF WINTER SPRINGS

COMMUNITY DEVELOPMENT DEPARTMENT

1126 East State Road 434

Winter Springs, FL 32708

Fax: (407) 327-7556

Please e-mail forms to:

CustomerService@winterspringsfl.org

Contractor Registration Form

New

Update

Company Name: _____

License Holder Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone#: _____ Fax#: _____

Alternate Phone#: _____

E-mail address: _____

For a new registration please provide us with the following items:

- General Liability (With the City of Winter Springs listed as the Certificate Holder)
- Workers' Compensation insurance or Exempt
- Local Business Tax
- State License
- \$6.00 Registration Fee (One Time Only Fee)