



CITY OF WINTER SPRINGS

1126 East State Road 434
Winter Springs, FL 32708
Phone: 407-327-1800 Fax: 407-327-4784
Email: customerservice@winterspringsfl.org

CONTRACTOR REGISTRATION FORM

New

Update

Company Name: _____

License Number: _____

License Holder Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone#: _____ Fax#: _____

Cell / Other 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
- Seminole County Registration Card (If you are a Registered Contractor).