

CONTRACTOR'S COMPLIANCE AGREEMENT

1. **OUR COMPANY WILL ENSURE A NOTICE OF COMMENCEMENT IS PREPARED, SIGNED, RECORDED AND POSTED AT YOUR PROJECT SITE BEFORE WE BEGIN WORK ON THIS PROJECT.**
2. **OUR COMPANY WILL OBTAIN ALL BUILDING PERMITS REQUIRED FOR THIS PROJECT AND POST THEM AT THE PROJECT SITE BEFORE WE BEGIN CONSTRUCTION.**
3. **ALL WORK WILL BE PERFORMED BY OUR OWN EMPLOYEES OR LICENSED AND INSURED SUBCONTRACTORS.**
4. **OUR COMPANY HAS WORKER'S COMPENSATION INSURANCE OR AN EXEMPTION. OUR WORKER'S COMPENSATION POLICY NUMBER IS _____, WHICH WAS ISSUED BY _____. IF ANY REPRESENTATIVE OF MY COMPANY OR A SUBCONTRACTOR IS RELYING ON AN EXEMPTION, YOU WILL BE PROVIDED A COPY OF EACH EXEMPTION CERTIFICATE. _____**
5. **OUR COMPANY HAS A GENERAL LIABILITY INSURANCE POLICY. OUR POLICY NUMBER IS _____. THE POLICY WAS ISSUED BY _____.**
6. **OUR BUSINESS IS REGISTERED WITH THE STATE OF FLORIDA AS A CORPORATION OR LIMITED LIABILITY COMPANY. ALL PAYMENTS ARE TO BE MADE IN THE NAME OF THE COMPANY.**
7. **OUR COMPANY IS:**
 - A. **A CERTIFIED STATE _____ CONTRACTOR AND A QUALIFIED BUSINESS ENTITY BY THE CONSTRUCTION INDUSTRY LICENSING BOARD. MY LICENSE NUMBER IS _____; OR**
 - B. **OUR COMPANY IS REGISTERED _____ CONTRACTOR IN BREVARD COUNTY. MY LICENSE NUMBER IS _____; OR**
 - C. **I HAVE CONFIRMED WITH THE APPROPRIATE BUILDING OFFICIAL THAT A CONTRACTOR'S LICENSE IS NOT REQUIRED FOR THE WORK THAT IS TO BE PERFORMED.**
8. **WITH THE EXCEPTION OF THE DOWN PAYMENT, WE WILL PROVIDE YOU A PARTIAL RELEASE OF LIEN EACH TIME YOU MAKE A PAYMENT TO OUR COMPANY.**
9. **IF YOU RECEIVE ANY NOTICE TO OWNERS, WE WILL PROVIDE YOU A PARTIAL RELEASE OF LIEN FROM EACH COMPANY OR INDIVIDUAL THAT PROVIDED A NOTICE SHOWING THEY HAVE BEEN PAID THROUGH THE DATE OF THE PAY REQUEST EACH TIME WE REQUEST A PAYMENT FROM YOU.**
10. **FINAL PAYMENT WILL NOT BE DUE UNTIL THE LOCAL BUILDING DEPARTMENT ISSUES AN APPROVED FINAL INSPECTION OR ISSUES A CERTIFICATE OF OCCUPANCY AND WE PROVIDE YOU A CONTRACTOR'S FINAL PAYMENT AFFIDAVIT.**
11. **ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH APPLICABLE CODES AND REGULATION.**
12. **UPON RECEIPT OF FINAL PAYMENT WE WILL PREPARE A NOTICE OF TERMINATION OF THE NOTICE OF COMMENCEMENT FOR YOUR SIGNATURE AND WILL RECORD THE NOTICE FOR YOU.**
14. **I AM AN AUTHORIZED REPRESENTATIVE OF _____.**

DATE

PRINTED NAME

SIGNATURE