


East Lake Tarpon Special Fire Control District

	<i>SOG 108.1a Contracting for Professional Services (CCNA)</i>	
	Implementation Date: 05/2003	Revision Date(s): 06/23/2009
		Reviewed Date(s): 1/15/2019
	Forms or Attachments: None	

CERTIFICATION REQUIREMENTS CHECKLIST:

Firm: _____ Date: _____

- _____ Proof of the firm being licensed in the State of Florida
- _____ A copy of the firm's Florida Department of Business and Professional Regulation's License to Practice.
- _____ If a corporation, a copy of the Florida Secretary of State's Corporation Registration
- _____ If applicable, proof of the firm's certification as a Minority Business Enterprise as provided by the Florida Small and Minority Business Assistance Act of 1985.
- _____ Proof of professional liability insurance.
- _____ A current SF-254 (federal standard form) with all sections completed.
- _____ Resumes of the firm's significant owners, officers, or principals in charge.

Comments:

Certification Reviewed By: _____ Date: _____

Certification Approval: _____ Date: _____