

**OKALOOSA COUNTY
MARINE CONTRACTOR'S EXPERIENCE AFFIDAVIT**

APPLICANT NAME: _____

ADDRESS: _____ CITY _____ ST _____ ZIP _____

PHONE: HOME - (____) _____ WORK - (____) _____

-----**EXPERIENCE INFORMATION**-----

I _____, am qualifying for the Marine Contractor's examination sponsored by Okaloosa County, per Ordinance No. 07-32.

One year of structurally related experience in four (4) or more of the following areas, please circle all that apply:

- | | | | | |
|---------------|-----------------|--------------|-------------------|-----------------------|
| Site Work | Excavation | Footings | Piles & pile caps | Laying concrete slabs |
| Masonry Walls | Trusses | Wood Framing | Reinforcement bar | Steel erection |
| Formwork | Column erection | | | |

Four (4) years of experience is required before the examination can be taken, your experience is broken down as follows:

Mark One:

- ___ 1. Four (4) years of proven construction related experience with at least one (1) year of structurally related experience in Marine Construction.
- ___ 2. A Bachelor's degree in a construction related field (equivalent to three (3) years experience), and at least one (1) year of structurally-related experience in residential construction.
- ___ 3. A Bachelor's degree in a non-construction related field (equivalent to two (2) years experience), and two (2) years of experience in residential construction, with at least one (1) of those years being structurally-related.
- ___ 4. An Associate's degree in a construction related field (equivalent to one (1) year of experience), and three (3) years of experience in residential construction, with at least one (1) of those being structurally related.

For the purpose of experience requirements, a minimum of 2,000 man-hours shall be used in determining one (1) year of work experience, per Okaloosa County Ordinance 07-32.

Applicable related degrees are as follows: Civil Engineering, Building Construction, and Architecture. All other degrees qualify in the non-related category. A copy of official college transcripts/diplomas must accompany this application.

NOTE: MISREPRESENTATION OF INFORMATION ON THIS APPLICATION MY RESULT IN DENIAL OF THIS APPLICATION.

Please check one:

- | | |
|---|---------------------------------|
| ___ Active FL State Certified General, Building, or Residential Contractor | ___ Active Registered Architect |
| ___ Active FL State Registered General, Building, or Residential Contractor | ___ Active Building Official |
| ___ Active Registered Engineer | ___ Active Marine Contractor |

Print name of person verifying experience

Signature of person verifying experience

Address of person verifying experience

State License Number

Phone Number

STATE OF: _____ COUNTY OF: _____

The above license holder, whose name is _____, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this _____ day of _____ 20 ____.

Notary's Signature

My Commission Expires

VERIFICATION INFORMATION

This section to be completed by the person verifying one (1) year of your Marine Construction experience

___ Active Marine Contractor

Print & Sign name of person verifying experience

Address of person verifying experience

County Competency card number of Occupation License Number

Phone Number

STATE OF: _____ COUNTY OF: _____

The above license holder, whose name is _____, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this _____ day of _____ 20 ____.

Notary's Signature

My Commission Expires