Contractor Participation Application



CONTRACTOR / INSTALLER						
Business Information						
Company Name:		Email Address:				
Work Phone:	Mobile Phone:		Fax Number:			
Street Address Line 1:						
Street Address Line 2:						
City:	State:	Postal Code:	County:			
Year Business Established (under present company name):		Website:				
Would you like us to host a Florida PACE Funding Agency Contractor Website on your behalf? (If yes, we will contact you to gather details, Yes No graphics and applicable text):						
Energy audits provided (check all that apply): Bu	ilding Analyst - BPI	HERS Rater - RESNET Licensed Professional Engineer				
Certified Energy Auditor - Association of Energy Engineers Utility Conducted Audit						
Contact Information						
Contractor Name:	Email Address:					
Work Phone:	Mobile Phone:		Fax Number:			
Street Address Line 1:						
Street Address Line 2:						
City:	State:	Postal Code:	County:			
Availability						
Please check off your preferred method of work communication:	ork Phone	Mobile Phone Email	Fax			
PROPERTY & SERVICE INFORMATION						
Property Classifications & Services Offered						
Property Classifications (check all that apply):	esidential	Commercial Industr	rial Other			
Qualifying Improvements (check all that apply):						
Energy Efficiency	Wind Resistance		Renewable Generation			
Examples of Qualifying Improvements	Examples of Qualifying Improvements		Examples of Qualifying Improvements			
Air sealing Energy Controls/Recovery	• Roof Strengthening • Hurricane Tie-downs		• Solar Thermal • Solar PV			
• Efficient HVAC • EV Charging Eqipment	• Wind-resistant Shi	t Shingles • Storm Shutters				
Increase Daylight • Efficient Lighting	Gable-end Bracing Opening Protection					
• Windows						









RENEWABLE ENERGY

WIND RESISTANCE

ENERGY EFFICIENCY

Contractor Participation Application



STATE OF FLORIDA							
Certified License Information (for listed contact)							
Certified License Number:		Type of Certified Contractor Licen (click one):	se State	Municipal			
Certified License Expiration Date (MM/DD/YYYY):	Certified Licensure Ci	ty:	Certified Licensure County:				
Registered License Information (for listed contact)							
Registered License Number:		Type of Registered Contractor Lic (click one):	ense State	Municipal			
Registered License Expiration Date (MM/DD/YYYY):	Registered Licensure	City:	Registered Licensure County:				
Local Government License Information (for listed contact)							
Local Government License Number:		Type of Registered Contractor Lic (click one):	ense State	Municipal			
Registered License Expiration Date (MM/DD/YYYY):	Registered Licensure	City:	Registered Licensure County:				
 The State listing of registered licensure may not include registrations obtained at the municipal level. This will need to be verified. Contractors may have 1 or more licenses or registrations. For additional licenses, please attach a separate listing containing all the information as above. Some Contractors may not have any (e.g., Insulation Installers). 							
Acknowledgement & Signature							
I acknowledge that I have read and accepted the Terms and Conditions and the Program Code of Conduct as instructed on the E VEST Florida website. I acknowledge that the information provided herein is true, correct, and complete, to the best of my knowledge and belief. I acknowledge that the application fee of \$50 is not refundable. I acknowledge and understand that if I am accepted as a qualified Contractor, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. Print Name: Date (MM/DD/YYYY): Date (MM/DD/YYYYY):							
Application Submission & Fee							
Make Checks Payable to: LEIDOS ENGINEERING, LLC • Please UPLOAD your completed and signed application to the E VESTFlorida.com website, or FAX the aforementioned document to (407) 648-8382, or MAIL your application to the following address: LEIDOS ENGINEERING, LLC – PACE Processing, 1000 Legion Place, Suite 1100, Orlando, FL 32801 *Your non-refundable application fee of \$50 must be mailed to the above address. Applications will be reviewed upon receipt of application and application fee.							
For Office Use Only							
Annual Application Fee:		Application Acceptance Date (MM/DD/YYYY):					









RENEWABLE ENERGY

WIND RESISTANCE

ENERGY EFFICIENCY