



# FLORIDA DEPARTMENT OF Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

Ron DeSantis  
Governor

Jeanette Nuñez  
Lt. Governor

Noah Valenstein  
Secretary

## PETROLEUM RESTORATION PROGRAM CONTRACTOR QUALIFICATION FORM

Contractor Name: \_\_\_\_\_ F.E.I.D. No.: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contact Name/Title: \_\_\_\_\_

Contact E-Mail: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

The above contractor hereby certifies to the Florida Department of Environmental Protection (DEP) that it meets the following requirements for contractors participating in the Petroleum Restoration Program pursuant to Rule 62-772.300, Florida Administrative Code:

1. Maintains all applicable certifications and professional licenses required by law (*provide each individual's valid license to practice professional geology and professional engineering from the Florida Bureau of Business and Professional Regulation (DBPR) or a copy of an executed contract with another licensed professional and their valid Florida license; and valid professional liability insurance certificate, confirmation of registration with Dept. of State, and confirmation of registration with My Florida Marketplace*). Yes  No
2. Complies with all applicable OSHA regulations. Yes  No
3. Maintains Workers' Compensation Insurance for all employees (*provide valid insurance certificate or documentation of exemption from Chapter 440, Florida Statutes, (F.S.)*). Yes  No
4. Maintains Comprehensive General Liability Insurance with minimum limits of at least \$1 Million per occurrence and \$1 Million annual aggregate for each and has named the State as an additional insured (*provide valid insurance certificate*). Yes  No
5. Maintains Comprehensive Automobile Liability Insurance with minimum limits of at least \$1 Million per occurrence and \$1 Million annual aggregate for each and has named the State as an additional insured (*provide valid insurance certificate*). Yes  No
6. Maintains Professional Liability Insurance with minimum limits of at least \$1 Million per occurrence and \$1 Million annual aggregate (*provide valid insurance certificate*). Yes  No
7. Has the capacity to perform or directly supervise the majority of work at a site in accordance with Section 489.113(9), Florida Statutes. Yes  No

\_\_\_\_\_  
Print Name/Title of Company Officer

\_\_\_\_\_  
Certified By (Signature)

\_\_\_\_\_  
Date

This form will be kept on file by the DEP. Contractors must immediately notify the DEP of any change in the above criteria. The DEP may order a suspension or cessation of work for failure of a contractor to maintain their required qualification. Please return this form to the Petroleum Restoration Program, Attn.: Contractor Qualification Coordinator, Mail Station 4575, at the letterhead address or via email to

[DWM.PRP.Contractor.Recommendations@dep.state.fl.us](mailto:DWM.PRP.Contractor.Recommendations@dep.state.fl.us)