

**CONSUMER PROTECTION DIVISION**

1 North University Drive, Box #302 • Plantation, Florida 33324
954-765-1700 • broward.org/consumer

Motor Vehicle Body Repair & Paint Technician Certification/Apprentice Permit Application

Application must be completed prior to appointment, or you may be required to schedule another appointment.

☐ New Application☐ Certified Technician

BT#

License Year

☐ Renewal Application☐ Apprentice**Personal Information**

Applicant Name	Date of Birth		
Home Address	City	State	Zip
Mailing Address	City	State	Zip
Home Phone	Mobile Phone		
Email (email will be used for all future correspondence)			

Employer Information

Employer Name	AB License #		
Employer Address	City	State	Zip
Employer Phone	Employer Email		

Certification Type

Expiration Date

Copy of Certification Attached?

☐ B2 Painting and Refinishing

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☐☐ B4 Structural Analysis & Damage Repair

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☐☐ Motorcycle Repair

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☐

You must provide a copy of your ASE, AATI, or Division approved certificates.

Fees (Non-Refundable)**Payment Methods****Annual Fees****Late Fees Assessed after December 31**

Certified Technician Fee

_____ @ \$75 = _____

Total \$ _____

Apprentice Fee

_____ @ \$30 = _____

Lost Card/License Replacement Fee

_____ @ \$20 = _____

Certified Technician Late Fee

_____ @ \$15 = _____

Apprentice Late Fee

_____ @ \$10 = _____

By mail or drop-off: **Do not** include payment (invoice will be emailed to you for payment).

In-person: Cash, check, credit card, or money order.

I certify, under penalty of law that the information provided on this application is true and correct and I acknowledge that I am aware that all information I provide with my application, except credit card numbers, is a matter of public record and is not considered confidential. Email will be used for all future correspondence.

Signature

Date

***Return this application with all required documentation to the address above.
Applications emailed to the Division will not be processed and will be discarded.***

Office Use Only

Date Received _____ Receipt No. _____ Amount Paid _____ Processor _____ ☐ Corp Active

3/5/26