

**CONSUMER PROTECTION DIVISION**

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

Motor Vehicle Repair Technician Certification; Apprentice/Lube and Tire Permit Application

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

☐ New Application ☐ Certified Technician ☐ Lube/Tire Specialist License Year
☐ Renewal Application ☐ Apprentice AT#

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

Business Name	AR License #		
Business Address	City	State	Zip
Business Phone	Business Email		

Certification Type**Exp. Date****Exp. Date**

☐ A1 Engine Repair	_____	☐ A5 Brakes	_____
☐ A2 Automatic Transmission/Transaxle	_____	☐ A6 Electrical Systems	_____
☐ A3 Manual Drive Train and Axles	_____	☐ A7 Heating and Air Conditioning	_____
☐ A4 Suspension and Steering	_____	☐ A8 Engine Performance	_____
		☐ Motorcycle Repair	_____

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

Fees (Non-Refundable)**Payment Methods**

Annual Fees	Late Fees Assessed after Expiration Date	
Certified Technician (Expires April 30)	# _____ @ \$75 = _____	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.
Apprentice (Expires March 31)	# _____ @ \$30 = _____	
Lube/Tire Specialist (Expires May 31)	# _____ @ \$30 = _____	
Lost Card/License Replacement	# _____ @ \$20 = _____	
Certified Technician Late Fee	# _____ @ \$15 = _____	
Apprentice Late Fee	# _____ @ \$10 = _____	
Lube/Tire Specialist Late Fee	# _____ @ \$10 = _____	Total \$ _____

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