

Resilient Environment Department

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.

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

□ Renewal Application □ Apprentice

Personal Information								
Applicant Name		Date of Birth						
Home Address		City		State	Zip			
Mailing Address		City		State	Zip			
Home Phone								
	Mobile Phone							
Driver License #	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)				ayme	nt Methods			
Annual Fees	Late Fees Assesse # @ \$75 =	ed after Expiration Dat		mail: C	heck only			
Certified Technician (Expires April 30) Apprentice (Expires March 31)		Total \$						
Lube/Tire Specialist (Expires May 31)	# @ \$30 =		In-p	person:	Check or credit card			
Lost Card/License Replacement	#@ \$20 =	<u> </u>						
Certified Technician Late Fee Apprentice Late Fee	# @ \$15 = # @ \$10 =							
	# @ \$10 = # @ \$10 =							
l certify, under penalty of law that the			is true and co	rrect a	Ind 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 necessary documentation and payment to the Division address above

OFFICE USE ONLY

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