



City of Coral Gables

Local Landscape

Vehicle Registration Application

Finance Department / Collection Division

Coral Gables City Hall • 405 Biltmore Way, Coral Gables, FL 33134 • 305-460-5296

Year _____

(Expires December 31st)

Activity No. _____

LBT No. _____

TO BE COMPLETED BY APPLICANT

Company Name (if applicable) _____

Company/Owner's Address _____ Company Phone (if applicable) _____

Name of Owner/President _____ Mobile Phone _____

Email Address _____

Emergency Contact Name _____ Phone Number _____

Vehicle Information (List all – use additional sheet if necessary)

Make	Truck/Trailer	Tag No.	Vehicle Registered Owner, Name and Address	Finance Use-Registration No.

Services to be provided: (Check all that apply)

- Landscape Maintenance Tree Trimming Certification number _____ (As required by City Code Section 82-27)
(i.e. International Society of Arboriculture (ISA) certified arborist, Broward County Tree Trimmer License, or similar.)

In accepting this registration form the City of Coral Gables in no way endorses, warrants or otherwise recommends the quality of work, experience, legality, character, reputation, background (criminal or otherwise) or qualifications of the tree trimmer, landscaper or landscaping company. In signing this form, applicant affirms that the information submitted in this application is true and correct to the best of his/her knowledge and that he/she is subject to the City's False Claims Ordinance, Ch. 39 of the City Code.

Print Name: _____ Signature: _____ Date: _____