

Type information, press Enter.

Last activity:

Business control 11218

Updated: 01/05/15 by KEYWKGP

Business name & addressMailing address

BOTSFORD BUILDERS, INC.

P.O. BOX 421125

405 PETRONIA ST 3

SUMMERLAND KEY

FL 33042

KEY WEST

FL 33040

License number : 15 00027641

Appl, issue, expir 110314 110314 93015

License status (F4) . . . AC ACTIVE

Classification (F4) . . . 12B15 CONTRACTOR - CERT GENERAL CONTRACTOR

Exemption (F4)

License comments

License restrictions

Gross receipts

Reprint this license . N Y=Yes, N=No

Additional charges . . N Y=Yes, N=No

Extra requirements . . N * Y=Yes, N=No

Miscellaneous . . N Y=Yes, N=No

Sub codes . . . N Y=Yes, N=No

More...

F3=Exit F5=Code description

F9=Applicant/Qualifier

F10=Business maintenance

F12=Cancel

F24=More keys

License number : 15 00027641
Business control . . . : 11218 BOTSFORD BUILDERS, INC.
Classification : 12B15 CONTRACTOR - CERT GENERAL CONTRACTOR

Type option or information, press Enter.

4=Delete a requirement

----- Additional Requirements -----

Opt	Code(F4)	Description	Document number	Expiration date	
-	CL	COUNTY LICENSE			
-	CR	CITY REGISTRATION	NOT REQUIRED	123120	
-	WCE	WORKER'S COMP EXEMPTION	NOT REQUIRED	123120	R
-	001	CITY UTILITY ACCOUNT			
-	002	COMMERCIAL GARBAGE			
-	003	LIABILITY INSURANCE	TBD	100115	R
-	004	WORKER'S COMP POLICY	019606932	10116	R
-	005	STATE LICENSE	CGC024694	83116	R

Bottom

F3=Exit F4=Prompt F12=Cancel

11:05:31 AM 5/8/2015

Licensee Details

Licensee Information

Name: **BOTSFORD, BRIAN HARLOW (Primary Name)**
BOTSFORD BUILDERS INC (DBA Name)

Main Address: **PO BOX 421125**
SUMMERLAND KEY Florida 33042

County: **MONROE**

License Mailing:

License Location: **24245 CARIBBEAN DR W**
SUMMERLAND KEY FL 33042

County: **MONROE**

License Information

License Type: **Certified General Contractor**

Rank: **Cert General**

License Number: **CGC024694**

Status: **Current, Active**

Licensure Date: **03/03/1983**

Expires: **08/31/2016**

Special Qualifications **Qualification Effective**

Construction Business **02/20/2004**

Alternate Names

[View Related License Information](#)

[View License Complaint](#)

[1940 North Monroe Street, Tallahassee FL 32399](#) :: Email: **[Customer Contact Center](#)** :: Customer Contact Center: 850.487.1395

The State of Florida is an AA/EEO employer. **[Copyright 2007-2010 State of Florida. Privacy Statement](#)**

Under Florida law, email addresses are public records. If you do not want your email address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. Please see our **[Chapter 455](#)** page to determine if you are affected by this change.