



BOARD OF COUNTY COMMISSIONERS  
ESCAMBIA COUNTY, FLORIDA

Development Services Department  
3363 West Park Place, Pensacola, FL 32505  
(850) 595-3550 - Telephone  
(850) 595-3401 - Facsimile  
[www.mvescambia.com](http://www.mvescambia.com)

*Appl for Restoration*  
exp: 2/18/12

CONTRACTOR LICENSE  
Application Sufficiency Review

Name of Applicant Rankins, Thaddeus L  
Phone 346-5336

Date 11/7/12  
ME3002

The following documents are required in accordance with State Law F.S. 489.105; Sec. 18 - 35 and Sec. 18-155.

- Applicant is at least 18 years of age.
- Completed, signed and notarized Application Form.
- Remittance of non-refundable application fee of \$150.
- Original Trade Experience Verification form proving at least four (4) years of experience, signed by a Licensed Contractor. (W-2's, correspondence from Office Manager, DD-214 may also be submitted as additional evidence of verification). [No self verification will be accepted.]
- Current General Liability and/or Workers' Comp Insurance, if applicable.
- Proof of current Continuing Education requirements, if applicable.
- Summary of Work Completed while licensed, if applicable.
- Written reason for failure to renew during renewal/restoration period.
- Reason for Contractor failing to maintain current address with Board, if applicable.
- Letter of reference from three (3) major suppliers, if applicable.
- Copy of Drivers License (with photo).
- Copy of State License, if applicable.

*delinquent / Actice as of 9/14/12*  
*11/13/12*

[Electrical Application additional requirements on back.]

Intake Review: \_\_\_\_\_  
Date: \_\_\_\_\_

Staff Recommendation: \_\_\_\_\_  
Intent to: \_\_\_ Approve \_\_\_ Deny

Building Official:  
Approved \_\_\_\_\_ Denied \_\_\_\_\_

Board Chairman:  
Approved \_\_\_\_\_ Denied \_\_\_\_\_

Signature \_\_\_\_\_  
Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Date: \_\_\_\_\_



## ELECTRICAL APPLICATIONS

Application procedures for Electrical Contractor Applicants, depending upon trade applied for:

### Master Electrician (Electrical Contractor) or Alarm System Contractor One, Two & Residential:

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |           |       |       |     |     |       |       |       |       |   |       |       |       |     |       |
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| <ol style="list-style-type: none"> <li>1. Satisfactory proof of at least four years related working experience in the <u>electrical construction trade, alarm system trade,</u> satisfactory to the Board of Electrical Examiners. Such proof shall consist of at least one of the following:                     <ol style="list-style-type: none"> <li>i. A completion certificate from a recognized four-year apprenticeship program.</li> <li>ii. A notarized affidavit from an employer certifying related electrical experience.</li> <li>iii. Submission of an equivalent master electrician's or electrical contractor's license from a jurisdiction acceptable to the Board and certification of four years related working experience in the electrical trade as outlined in this subsection.</li> <li>iv. A degree in electrical engineering or electrical technology and two years related work experience in the electrical trade.</li> </ol> </li> <li>2. At least two personal references.</li> <li>3. A fee as set by the Board of County Commissioners.</li> <li>4. A passing grade for the examination is 75%; a grade of 70% or above may be locally reviewed upon request of the individual and upon payment of a required fee through the Board of Electrical Examiners.</li> </ol> | <table border="0" style="width: 100%;"> <tr> <td style="text-align: center; width: 50%;"><u>Yes</u></td> <td style="text-align: center; width: 50%;"><u>No</u></td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center; font-size: 2em;">N/A</td> <td style="text-align: center; font-size: 2em;">N/A</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">✓</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center; font-size: 1.5em;">n/a</td> <td style="text-align: center; font-size: 1.5em;">_____</td> </tr> </table> | <u>Yes</u> | <u>No</u> | _____ | _____ | N/A | N/A | _____ | _____ | _____ | _____ | ✓ | _____ | _____ | _____ | n/a | _____ |
| <u>Yes</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>No</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |           |       |       |     |     |       |       |       |       |   |       |       |       |     |       |
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### Maintenance Electrician:

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| <ol style="list-style-type: none"> <li>1. Applicants for a Maintenance Electrician Card shall apply in writing to the Board of Electrical Examiners for a maintenance electrician card for the corporation, company, partnership or firm with whom they are employed full-time and shall furnish the following:                     <ol style="list-style-type: none"> <li>i. Experience references to show a four-year background in the electrical trade.</li> <li>2. At least two personal references.</li> <li>3. A list of the employers for the last four (4) years with whom employed, giving specific job description and titles held, etc.</li> <li>4. Pay an initial fee and a renewal fee thereafter, as set by resolution by the Board of County Commissioners.</li> <li>5. In order for a holder to maintain a valid maintenance electrical card the card must be renewed every two years (at the time set aside for the renewing of the master electrician license) and payment of the renewal fee.</li> <li>6. A passing grade for the examination is 75%; a grade of 70% or above may be locally reviewed upon request of the individual and upon payment of a required fee through the Board of Electrical Examiners.</li> </ol> </li> </ol> | <table border="0" style="width: 100%;"> <tr> <td style="text-align: center; width: 50%;"><u>Yes</u></td> <td style="text-align: center; width: 50%;"><u>No</u></td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </table> | <u>Yes</u> | <u>No</u> | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
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### Journeyman Electrician:

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| <ol style="list-style-type: none"> <li>1. Satisfactory proof of at least two years related working experience in the electrical trade satisfactory to the Board of Electrical Examiners. Such proof shall consist of at least one of the following:                     <ol style="list-style-type: none"> <li>i. A notarized affidavit from an employer certifying related electrical experience.</li> <li>ii. Submission of an equivalent journeyman electrician certificate from a jurisdiction acceptable to the Board of Electrical Examiners and certification of two (2) years related working experience in the electrical trade as outlined in this subsection.</li> </ol> </li> <li>2. At least two personal references.</li> <li>3. A fee as set by the Board of County Commissioners.</li> <li>4. A passing grade for the examination is 65%; a grade of 60% or above may be locally reviewed upon request of the individual and upon payment of a required fee through the Board of Electrical Examiners.</li> </ol> | <table border="0" style="width: 100%;"> <tr> <td style="text-align: center; width: 50%;"><u>Yes</u></td> <td style="text-align: center; width: 50%;"><u>No</u></td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </table> | <u>Yes</u> | <u>No</u> | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
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Escambia County Building Inspections Division  
 3363 West Park Place  
 Pensacola, FL 32505  
 Telephone: (850) 595-3550 - Facsimile (850) 595-3401  
 On the Web: www.myescambia.com

**CONTRACTOR LICENSING  
 CHANGE OF STATUS**

(PLEASE PRINT CLEARLY OR TYPE)

Please provide the following in order to request a change on your County license:

1. If qualifying additional entity:  
 Proof from Florida Division of Corporations showing Active Status for Corporation or LLC issued in new name, (i.e., print out from www.sunbiz.gov, etc.);
2. Completed Change of Status form;
3. Certificate of Insurance and Workers' Compensation information with the new name;
4. Proof of Continuing Education requirements (for reinstatement and inactive to active status change only);
5. Application fee is due at time of application submittal. *ME 3002*

LICENSE NO.: ER13014559

Applicant's Full Legal Name (no nicknames, please)

Rankins Thaddeus Lydell (DOB) 02/09/1973  
 Last First Middle

Mailing Address 6115 N. Davis Hwy Pensacola, FL 32504  
 Street/City/State/Zip Code

Driver's License Number/State R525-812-73-049-0

Work Phone 850-341-7300 Fax Number none

Email allpowerelectricalservices@gmail.com Cell Number 850-346-5336

**Change Requested:**

**Application Fee:**

<input type="checkbox"/>	Address/Telephone Change	N/C
<input type="checkbox"/>	Active status to Inactive status	\$ n/c - no Board action req'd
<input type="checkbox"/>	Inactive status to Active Status	\$ 50.00 - Payment of appl fee and balance of renewal fee; proof of current CEU's; no Board action req'd
<input type="checkbox"/>	Business Name Change	\$ 50.00 - no Board action req'd
<input type="checkbox"/>	Qualifying Additional Entity	\$150.00 prorated to Expiration Date
<input checked="" type="checkbox"/>	Restoration of delinquent license (91 days - 2 yrs) <i>exp: 2/18/12</i>	\$150.00 Application fee plus renewal fee (w/Board approval)
<input type="checkbox"/>	Reinstatement of delinquent license (over - 2 yrs)	\$150.00 Application fee plus renewal fee for each year w/Board approval
<input type="checkbox"/>	Duplicate Contractor Card	\$ 40.00

LICENSING & INVESTIGATIONS SECTION  
 CONTRACTOR LICENSING

RECEIVED  
 NOV 07 2012  
 ELECTRICAL EXAMINERS BOARD  
 Revised 09/12/11

BUSINESS NO LONGER QUALIFYING: \_\_\_\_\_

BUSINESS APPLYING TO QUALIFY: \_\_\_\_\_

List all licenses that Applicant, Partners or Corporate Officers hold or have held in Escambia County:

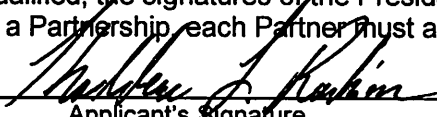
License Type: \_\_\_\_\_ County No.: \_\_\_\_\_

License Type: \_\_\_\_\_ County No.: \_\_\_\_\_

License Type: \_\_\_\_\_ County No.: \_\_\_\_\_

**AFFIDAVIT**

If you are qualifying as an individual or as sole proprietor, only you need to sign below. If you are qualifying a Proprietorship, you and the Owner must sign. If a Corporation is being qualified, the signatures of the President, Vice-President and Secretary are required to sign. If it is a Partnership, each Partner must also sign below attesting the information is correct.

  
Applicant's Signature \_\_\_\_\_ Date 11-6-12

\_\_\_\_\_  
Signature of Partner/President/Sole Proprietor/Owner \_\_\_\_\_ Date

\_\_\_\_\_  
Signature of Partner/Vice-President \_\_\_\_\_ Date

\_\_\_\_\_  
Signature of Secretary/Treasurer \_\_\_\_\_ Date

The undersigned hereby makes application for certification under the provision of the Escambia County Code of Laws and Ordinances and vouches for the truth and accuracy of all statements and answers herein. **If "Yes" is the answer to any question below, please explain in detail on an attached sheet of paper.** Has the Applicant or any person in the Organization being qualified:

	<u>Yes</u>	<u>No</u>
1. Been declared bankrupt or been a member of a firm adjudicated bankrupt or in bankruptcy proceedings?	_____	<input checked="" type="checkbox"/>
2. Failed to complete a contract?	_____	<input checked="" type="checkbox"/>
3. Failed or been a member of a firm which failed to pay subcontractors/material suppliers or employees on a contract?	_____	<input checked="" type="checkbox"/>
4. Had liens, law suits, or judgments pending or filed as a result of construction operations?	_____	<input checked="" type="checkbox"/>
5. Had a contractor's license revoked, suspended, reprimanded, placed on probation, or other discipline?	_____	<input checked="" type="checkbox"/>
6. Had any unpaid, past due bills over 90 days for claims of labor, material or services?	_____	<input checked="" type="checkbox"/>

7. Ever been convicted of a crime, had adjudication withheld, or presently charged with a felony?

\_\_\_\_\_ ✓

As a qualifying agent, I certify I will act for the firm/partnership/corporation for which I am qualifying in all matters concerning the contracting business and I will actively supervise all construction work and be responsible for ascertaining all such work is completed according to approved plans, applicable codes and good construction standards. If at any time during this certification, I cease to be able to act for this business organization, I will immediately notify the Escambia County Contractor Competency Board, in writing.

We, jointly, understand any willful falsification of any information herein, including all supplementary pages and attachments, is grounds for disqualification; additionally, all information contained herein, including: all supplementary pages and attachments shall become part of public records upon signature.

Thaddeus L. Rankin  
Signature of Contractor

\_\_\_\_\_  
Signature of President/Partner

\_\_\_\_\_  
Signature of Vice President/Partner

\_\_\_\_\_  
Signature of Secretary/Partner

STATE OF Florida

COUNTY OF Escambia

The applicant who name is Thaddeus L. Rankin<sup>esb</sup>  
Personally appeared before me and is personally known and/or produced as identification FL  
DL# R535 872 73049-0

SWORN TO AND SUBSCRIBED before me this 7<sup>th</sup> day of November, 2012.

Linda S. Brooks  
NOTARY PUBLIC  
Printed Name of Notary: Linda S. Brooks

(SEAL)

Approved: _____	Rejected: _____
_____ <b>Chairman</b> Escambia County Contractor Competency Board	
Date: _____	



2:00:08 PM 11/13/2012

**Data Contained In Search Results Is Current As Of 11/13/2012 01:58 PM.**

**Search Results**

**Please see our [glossary of terms](#) for an explanation of the license status shown in these search results.**

**For additional information, including any complaints or discipline, click on the name.**

License Type	Name	Name Type	License Number/Rank	Status/Expires
Registered Electrical Contractor	<u><a href="#">ALL POWER ELECTRICAL SERVICES, INC.</a></u>	DBA	ER13014559 Reg Electrical	Delinquent, Active 09/14/2012

**Main Address\*:** 6115 N DAVIS HWY APT#20-B PENSACOLA, FL 32504

Registered Electrical Contractor	<u><a href="#">RANKINS, THADDEUS LYDELL</a></u>	Primary	ER13014559 Reg Electrical	Delinquent, Active 09/14/2012
----------------------------------	-------------------------------------------------	---------	---------------------------------	-------------------------------------

**Main Address\*:** 6115 N DAVIS HWY APT#20-B PENSACOLA, FL 32504

[Back](#) [New Search](#)

**\* denotes**

Main Address - This address is the Primary Address on file.

Mailing Address - This is the address where the mail associated with a particular license will be sent (if different from the Main or License Location addresses).

License Location Address - This is the address where the place of business is physically located.

[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.

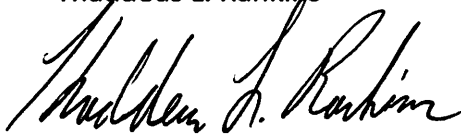
November 5, 2012

Dear Governing Bodies,

My license is currently delinquent and I am writing to request reinstatement. The reason for the lapse is I was originally licensed in Santa Rosa county and am only required to renew there every two years. When I became licensed in Escambia County, I mistakenly believed that I would renew every two years here as well. My business has been limited to service work that does not require a permit. Since I am rarely required to pull a permit, I was not aware that my license had expired on my birthday. I apologize for this error and will make sure that my license does not expire again.

Sincerely,

Thaddeus L. Rankins

A handwritten signature in black ink that reads "Thaddeus L. Rankins". The signature is written in a cursive style with a large initial 'T' and 'R'.

**Summary of work done :**

The majority of my work has been service work at various residential homes and commercial facilities. I also wired two residential homes one, in Cantonment, Florida and one on Pensacola Beach, Florida.

I also provide service work at the following churches:

**Mt. Olive Baptist Church**

**Calvary Christian Center**

**Believer's Life Center**

**New Beginning Ministry**

**Pentecostal Temple**

**Ferry Pass Baptist Church**

**St. Matthew Baptist Church**



**MATHES ELECTRIC SUPPLY CO., INC.**  
**6 WEST 41<sup>ST</sup> LANE**  
**P.O. BOX 9699**  
**PENSACOLA, FL 32513**  
**PHONE (850) 432-4161 ~ FAX (850) 434-6644**

November 7, 2011

To Whom It May Concern:

RE: Thaddeus Rankins  
6115 N. Davis Hwy  
Pensacola, Florida 32504

It is with great pleasure that we can offer a letter of recommendation on Mr. Thaddeus Rankins. Mr Rankins has been a contractor and a cash customer for the past two years and has given Mathes Electric a lot of business. I would also like to add that Mr. Rankins has worked as an apprentice for twenty years prior to becoming a contractor.

We have noticed that he conducts himself in a very professional manner & enjoys a good reputation in our community.

If I can be of further assistance to you please give me a call at the above listed number.

Sincerely,



Jackie Andresen  
Credit Manager  
e-mail [jackie@mathselectric.com](mailto:jackie@mathselectric.com)



Credit  
Services



November 5, 2012

Thaddeus L Ranking  
6115 N Davis Hwy Apt 20B  
Pensacola, FL 32504

Attn: Thaddeus Ranking  
Fax #: (850) 857-0374

Re: Account # XXXXXXXXXX1951

Dear Mr. Ranking,

Thank you for your inquiry regarding your Home Depot credit account.

As per your request, this letter is to confirm that your account now shows a balance of \$00.00 as of 11/5/12.

If you have any further questions please contact our Customer Service department at 1-800-677-0232. Thank you for being a valued customer of The Home Depot.

Sincerely,

A handwritten signature in black ink that reads "April Winegar".

April Winegar  
Customer Service



The Power  
to Supply

*From the Desk of Brad McCurdy*

\*\*\*\*\*

**ALL POWER ELECTRICAL SVCS-01810703001**

**To whom it may concern:**

***ALL POWER ELECTRICAL SVCS has a active account with City Electric Supply.  
This account is always current and has never been past due.  
At the present ALL POWER ELECTRICAL SVCS has a \$5000.00 credit limit with City  
Electric Supply and has not overtraded or been past due.***

***If you have any questions or concerns on this matter, please contact me at  
anytime***

**Thanks,**

Brad McCurdy  
**Branch Manager**  
City Electric Supply  
PENSACOLA  
3717 NAVY BLVD  
Pensacola, FL 32507  
850-453-5551  
Fax - 850-453-8380  
Cell - 850-393-3485  
bmccurdy@ces-us.net



CITY ELECTRIC SUPPLY  
[www.cityelectricsupply.com](http://www.cityelectricsupply.com)

The Power  
to  
Supply You





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/2/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> McMahon-Hadder Insurance, Inc. 375 North 9th Ave., Suite A  Pensacola FL 32502	<b>CONTACT NAME:</b> Heather Adams	
	<b>PHONE (A/C, No, Ext):</b> (850) 484-7011	<b>FAX (A/C, No):</b> (850) 474-5201
<b>E-MAIL ADDRESS:</b> heather.adams@momahonhadder.com		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Southern Owners Ins. Co		<b>10190</b>
<b>INSURER B:</b> Bridgefield Casualty Insurance		<b>10335</b>
<b>INSURER C:</b>		
<b>INSURER D:</b>		
<b>INSURER E:</b>		
<b>INSURER F:</b>		

**COVERAGES** **CERTIFICATE NUMBER:** 12-13 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			78676737-12	1/1/2012	1/1/2013	EACH OCCURRENCE \$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000	
							PERSONAL & ADV INJURY \$ 1,000,000	
							GENERAL AGGREGATE \$ 2,000,000	
							PRODUCTS - COM/POP AGG \$ 2,000,000	
							\$	
A	AUTOMOBILE LIABILITY			78676737-12	1/1/2012	1/1/2013	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000	
	<input type="checkbox"/> ANY AUTO ALL OWNED AUTOS						BODILY INJURY (Per person) \$	
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS						BODILY INJURY (Per accident) \$
								PROPERTY DAMAGE (Per accident) \$
								\$
	UMBRELLA LIAB						EACH OCCURRENCE \$	
	EXCESS LIAB						AGGREGATE \$	
	DED						\$	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			196-24455	1/1/2012	1/1/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$ 100,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 100,000	
							E.L. DISEASE - POLICY LIMIT \$ 500,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<b>CERTIFICATE HOLDER</b>  Proof of Insurance	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  D Rentz, AAI/JESSIC

# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Advanced Residential Design & FL Building Code**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

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## Course Information

**Course Name:** Advanced Residential Design & FL Building Code

**Instructor:** Rebecca Boucher

**Course Number:** 0800689

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Advanced Code) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/28/2012

**Class ID:** 100084

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Powergrid Technologies**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Powergrid Technologies  
**Instructor:** Alex Pesiridis  
**Course Number:** 0800653  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Technical) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/28/2012  
**Class ID:** 100085

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

---



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Collections (The Offensive Game)**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Collections (The Offensive Game)  
**Instructor:** Charles Perry  
**Course Number:** 0800661  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Business Practice) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/27/2012  
**Class ID:** 100093

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

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# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Electrical Safety (2 Hours)**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Electrical Safety (2 Hours)  
**Instructor:** Alex Pesiridis  
**Course Number:** 0800333  
**Course Credit Hours:** 2  
**Course Credit Type:** FL ECLB 2 (Technical) or 2 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/27/2012  
**Class ID:** 100089

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

---



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Navigating the National Electric Code**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Navigating the National Electric Code  
**Instructor:** Tom Breslin  
**Course Number:** 0800326  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Technical) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/26/2012  
**Class ID:** 100090

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

---



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Positive Business Planning**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Positive Business Planning  
**Instructor:** Charles Perry  
**Course Number:** 0800288  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Business Practice) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/26/2012  
**Class ID:** 100092

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

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# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Laws and Rules - FL Statutes 489**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Laws and Rules - FL Statutes 489

**Instructor:** Patrick Brannon

**Course Number:** 0800283

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Business Practice) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/26/2012

**Class ID:** 100091

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Electrical Conductors in the Building Environment**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Electrical Conductors in the Building Environment  
**Instructor:** Tom Breslin  
**Course Number:** 0800282  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Technical) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/25/2012  
**Class ID:** 100088

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

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# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Aging In Place 2 (Residential Accessibility Apps)**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Aging In Place 2 (Residential Accessibility Apps)

**Instructor:** Becky Boucher

**Course Number:** 0800279

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Technical) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/24/2012

**Class ID:** 100087

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Aging In Place 1 (Residential Accessibility Apps)**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Aging In Place 1 (Residential Accessibility Apps)

**Instructor:** Becky Boucher

**Course Number:** 0800278

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Technical) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/21/2012

**Class ID:** 100086

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Construction Contracts**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

---

## Course Information

**Course Name:** Construction Contracts

**Instructor:** Charles Perry

**Course Number:** 0800276

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Business Practice) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/21/2012

**Class ID:** 100082

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Workplace Safety OSHA Fall Protection**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300

**Email Address:** allpowerelectricalservices@gmail.com

## **Student License Type & Numbers Provided:**

FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

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## Course Information

**Course Name:** Workplace Safety OSHA Fall Protection

**Instructor:** Roy Terepka

**Course Number:** 0800286

**Course Credit Hours:** 1

**Course Credit Type:** FL ECLB 1 (Workplace Safety) or 1 (General) credit

**Course Enroll Date:** 08/19/2012

**Course Completion Date:** 08/20/2012

**Class ID:** 100081

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC

**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.



# Certificate of Completion

This certificate is to certify that  
**Thaddeus Rankins**  
has completed  
**Workers Compensation Primer**

---

## Student Information

Thaddeus Rankins  
All Power Electrical Services, Inc.  
6115 N Davis Hwy #20B  
Pensacola, FL 32504

**Phone Number:** 850 341 7300  
**Email Address:** allpowerelectricalservices@gmail.com

**Student License Type & Numbers Provided:**  
FL, REGISTERED ELECTRICAL CONTRACTOR, ER13014559

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## Course Information

**Course Name:** Workers Compensation Primer  
**Instructor:** Patrick Brannon  
**Course Number:** 0800285  
**Course Credit Hours:** 1  
**Course Credit Type:** FL ECLB 1 (Workers Compensation) or 1 (General) credit

**Course Enroll Date:** 08/19/2012  
**Course Completion Date:** 08/20/2012  
**Class ID:** 100083

**Provider Name:** ON-LINE-CLASSES.COM DBA OF INFINITY LC  
**Provider Number:** 0004941

---

## Student Affidavit:

I, Thaddeus Rankins, a licensed professional, hereby swear under penalty of perjury, that I completed this continuing education course and personally fulfilled all mandated time and participation requirements, and that no other person acted on my behalf in fulfilling this obligation.

---





**Development Services Department  
Building Inspections Division**

3363 West Park Place  
Pensacola, Florida, 32505  
(850) 595-3550  
Molino Office - (850) 587-5770

**RECEIPT**

Receipt No. : **567366**

Date Issued. : 11/07/2012

Cashier ID : LSBROOKS

Application No. : ME3002

Project Name : Electrical

Address : 6115 N DAVIS HWY APT 20-B  
Pensacola, FL, 32504

Contractor : Thaddeus L. Rankins  
Company : ALL POWER ELECTRICAL SERVICES  
Address : 6115 N DAVIS HWY APT 20-B  
PENSACOLA, FL, 32504  
Phone : (850) 346-5336

**PAYMENT INFO**

Method of Payment	Reference Document	Amount Paid	Comment
<b>Check</b>	1007	\$150.00	App ID : ME3002~APPLICATION FOR RESTORATION OF LICENSE
		<b>\$150.00</b>	Total Check

Received From : THADDEUS L RANKINS ALL POWER ELECTRICAL SERVICES

Total Receipt Amount : **\$150.00**

Change Due : \$0.00

**APPLICATION INFO**

Application #	Invoice #	Invoice Amt	Balance	Job Address
ME3002	620252	150.00	\$0.00	
ME3002	660095	150.00	\$0.00	
<b>Total Amount :</b>		<b>300.00</b>	<b>\$0.00</b>	Balance Due on this/these Application(s) as of 11/7/2012