



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

*Appl for Exam
Building Contractor*

CONTRACTOR LICENSE
Application Sufficiency Review

Name of Applicant *Rene Santiestera* Date *4-11-13*
Phone *850-723-2745*

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.

[Electrical Application additional requirements on back.]

Intake Review: *[Signature]*
Date: *4-25-13*

Staff Recommendation: _____
Intent to: _____ Approve _____ Deny _____

Building Official:
Approved _____ Denied _____

Board Chairman:
Approved _____ Denied _____

Signature _____
Date: _____

Signature _____
Date: _____



BOARD OF COUNTY COMMISSIONERS
ESCAMBIA COUNTY, FLORIDA

Development Services Department
3363 West Park Place
Pensacola, FL 32505
(850) 595-3550 - Phone
(850) 595-3401 - FAX
www.myescambia.com

APPLICATION FOR EXAMINATION

SPONSORSHIP FEE: \$150.00
Please Make Check(s) Payable to Escambia County

PLEASE CIRCLE APPROPRIATE CATEGORY

BUSINESS & LAW IS REQUIRED OF ALL CATEGORIES (EXCEPT JOURNEYMEN)

Air Conditioning "A"
Air Conditioning "B"
Building Contractor
Boiler/Piping
Commercial Pool
Demolition
General
Journeyman Gas
Journeyman Plumber
Marine

Master Gas
Master Plumber w/Gas
Mechanical Contractor
Pool Service
Pressure Piping
Residential Contractor
Residential Pool
Roofing
Sheet Metal Contractor
Sign Erector - Non Electrical

Solar Water Heating
Specialty Structure Contractor
Sprinkler/Irrigation Contractor
Tower/Antenna Erector
Underground Utility Contractor
Doors/Windows/Siding
Other: _____

PLEASE PRINT OR TYPE

Applicant's Name (no nickname) RENE SANTIESTERAN
Home Address 4505 ST NAZAIRE RD Zip Code 32505
Business Address 4505 ST NAZAIRE RD Zip Code 32505
Mailing Address 4505 ST NAZAIRE RD Zip Code 32505
Home No. _____ Business No. 8507232745 Fax _____
Date of Birth 09-28-1970 Driver's License # & State Issued: _____
Business Name Applying to be Qualified US Coastal Builders
Mailing Address 4505 ST NAZAIRE RD Zip Code 32505
Phone No.: _____ Cell No.: 8507232745
Email address: Rene@UScoastalstucco.com



List the numbers of all State of Florida registered/certified Contractor Licenses that you currently hold/held:

RECEIVED

SP
APR 11 2013

AFFIDAVIT

The undersigned hereby makes application for licensure under the provisions of the Escambia County Code of Laws and Ordinances and vouches for the truth and accuracy and answers herein contained. Any willful falsification of any information contained in this application or attached forms are grounds for disqualification. If you are qualifying as an individual, 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 also required. If it is a Partnership, each Partner must also attest the information is correct. List all license numbers held by these individuals in the spaces provided below.

	✓	3/26/13
Applicant's Signature	Licenses Held	Date
	✓	3/26/13
Signature of Partner/President/Sole Proprietor/Owner		Date
Signature of Partner/Vice-President		Date
Signature of Secretary/Treasurer		Date

Were you ever refused a local/state certificate of competency? ___ Yes No
 If yes, please explain, in detail, on a separate sheet of paper and attach.

Are there any charges currently pending against you which would be grounds for disciplining your license(s)? ___ Yes No
 If yes, please explain, in detail, on a separate sheet of paper and attach.

Financial Responsibility

All applicants must answer the questions below. If you answer "yes" to any of the questions, a full explanation is required.

	<u>Yes</u>	<u>No</u>
Have you or a Partnership in which you were a Partner/Authorized Agent ever:		
1. Been declared bankrupt or been a member of a firm adjudicated bankrupt or in bankruptcy proceedings?	___	✓
2. Failed to complete a contract?	___	✓
3. Failed or been a member of a firm which failed to pay subcontractors/material suppliers or employees?	___	✓
4. Had liens, law suits, or judgments pending or filed as a result of construction operations?	___	✓
5. Ever been convicted of acting in the capacity of a contractor without a license?	___	✓
6. Had a contractor's license revoked, suspended, reprimanded, placed on probation, or other discipline?	___	✓
7. Have any unpaid, past due bills over 90 days for claims of labor, material or services?	___	✓
8. Ever been convicted of a crime, had adjudication withheld, or presently charged with a felony?	___	✓

NOTE: ANY APPLICANT WHO ANSWERS "YES" TO ANY QUESTION CONTAINED IN THE FINANCIAL RESPONSIBILITY SECTION OF THIS FORM MUST SUPPLY A COMPLETE EXPLANATION OF THE RESPONSE AND INCLUDE A STATEMENT DETAILING THE STEPS TAKEN BY THE APPLICANT TO PREVENT A RECURRENCE OF THE CIRCUMSTANCES LEADING TO THE CONVICTION, DISCIPLINE, JUDGMENT, BANKRUPTCY, OR OTHER EVENT LEADING TO THE RESPONSE. INCLUDE ANY PROOF OF PAYMENT, SATISFACTION OF LIENS, JUDGMENTS, PROBATION REQUIREMENTS, AND BANKRUPTCY DISCHARGE PAPERS. A SEPARATE SHEET MAY BE ADDED FOR EXPLANATION(S).

I certify I will act for the firm, partnership, or corporation for which I am qualifying in all matters concerning business, and I will actively supervise all construction work and be responsible for ascertaining that 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.

All information contained herein including all supplementary pages and attachments shall become part of public records upon your signature, except for those items excluded by the Privacy Act. I affirm the information I have given in this application is true and accurate and I understand any willful falsification constitutes grounds for disqualification. If I am currently a licensee, I understand action may be taken against my license if untrue statements are made in this application.

[Signature] — 3/26/13
Applicant's Signature Date

STATE OF Florida
COUNTY OF Santa Rosa

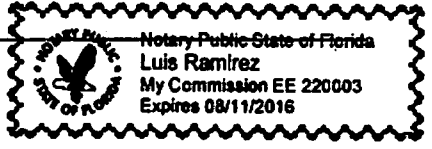
The applicant whose name is Rowe Santiesteban

Personally appeared before me and is personally known and/or produced as identification _____

SWORN TO AND SUBSCRIBED before me this 24 day of March, 2013

[Signature]
NOTARY PUBLIC

Printed Name of Notary: _____



Approved: _____ Rejected: _____

Chairman
Escambia County Contractor Competency Board
Date: _____



BOARD OF COUNTY COMMISSIONERS
ESCAMBIA COUNTY, FLORIDA

Development Services Department
3363 West Park Place
Pensacola, FL 32505
(850) 595-3550 - Phone
(850) 595-3401 - FAX
www.myescambia.com

EXPERIENCE VERIFICATION FORM

[Must be completed by Contractor other than Applicant]

INFORMATION TO BE COMPLETED BY APPLICANT		
Applicant's Name:	RENE SANTIESTEBAN	
Applicant's Title/Position:	President	
Employer's Name:	US Coastal Storage Inc.	
Employer's Address:	4505 St Nazaire Rd	
City/State/Zip Code:	Pensacola FL 32505	
Work Telephone No.:	850 723 2745	
Dates of Employment	From:	To:
Supervisor's Name:		

INFORMATION TO BE COMPLETED BY EMPLOYER		
Employing Agency/Company's Name:		
Company Address:		
Applicant's Position: N/A Self Employed		
Dates of Employment of Applicant	From:	To:
Please describe the applicant's duties, including any hands-on supervisory responsibilities:		

I attest the information provided above is true and accurate.

Contractor's Signature

Contractor License Number

STATE OF FL
COUNTY OF Escambia

I CERTIFY THAT René Santiesteban appeared before me and is personally known to me or produced as identification FL License
SWORN TO AND SUBSCRIBED before me this 5 day of April, 2010.

NOTARY PUBLIC

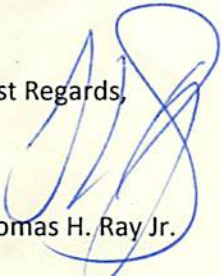
LICENSING & INVESTIGATIONS SECTION
CONTRACTOR LICENSING

April 10, 2013

To Whom it May Concern:

C.A. Lindman has used U.S Coastal as a sub-contractor since July of 2012. Rene Santiesteban has been a pleasure to work with. His company has performed many jobs for C.A. Lindman with a strong focus on stucco facade repair totaling 786,264.13 in value to date with satisfactory performance. We would recommend his company without hesitation. If you should need additional information, please feel free to give us a call.

Best Regards,



Thomas H. Ray Jr.

Branch Manager

4.25.13 1:58p.m. (EST)
Called Mr. Ray regarding
Applicant's prior employment
description:
exterior facade
Flashings
Veneers
per Mr. Ray

Tuesday April 9, 2013

To whom it may concern:

Rene Santiesteban has been part of our company for 5 years now, he is a dedicated hard working individual. Together we have completed the following projects, the trade he focuses on is Stucco, just to name a few projects: Freshmarket- Miami, Walmart- Pembroke Pines, Dicks Sporting Goods – Ft. Lauderdale and Aldi – WPB. I would highly recommend Rene Santiesteban to deliver any project he is presented and you will witness the excellent work he delivers. Should you have additional questions please reach me at my office.

Respectfully,



Paola J. Lopez
Executive Administrator
Sumaj Builders Corporation

cc: File

Florida *the Sunshine State*

DRIVER LICENSE CLASS E
S532-721-70-348-0

RENE ALFREDO
SANTIESTEBAN
4716 LILLIAN HWY
PENSACOLA, FL 32506-6438
DOB: 09-28-1970 SEX: M
ISSUED: 06-20-2011 HT: 5-08
EXPIRES: 09-28-2019

REST.
ENDORSE:

Rene Santie

ORGAN DONOR

Operation of a motor vehicle constitutes consent to any sobriety test required by law.



Development Services Department

Building Inspections Division

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

RECEIPT

Receipt No. : 577651

Date Issued. : 04/11/2013

Cashier ID : LSBROOKS

Application No. : APP130400009

Project Name : Application

Address : 4505 ST NAZAIRE ROAD
Pensacola, FL, 32505

PAYMENT INFO

Table with 4 columns: Method of Payment, Reference Document, Amount Paid, Comment. Includes a row for a check payment of \$150.00 and a total check row.

Received From : RENE SANTIESTERAN U S COASTAL BUILDERS

Total Receipt Amount : \$150.00

Change Due : \$0.00

APPLICATION INFO

Table with 5 columns: Application #, Invoice #, Invoice Amt, Balance, Job Address. Includes a summary row for Total Amount and a balance due note.