



# Private Provider Registration Form

Updated 6/9/2023

## GENERAL INFORMATION

Complete this form as part of your registration packet.

- Private Providers must be registered with the City of Tampa prior to commencing work.
- Private Providers are responsible for keeping registration records current.

## PRIVATE PROVIDER INFORMATION

Name of Firm: \_\_\_\_\_

Business Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Federal Employer Identification Number (FEIN): \_\_\_\_\_

## PRIVATE PROVIDER QUALIFIER

Name of Qualifier: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## INSTRUCTIONS

- Combine Registration Form and other required documentation into a single PDF file.
- Email completed registration PDF to [CSDHelp@tampagov.net](mailto:CSDHelp@tampagov.net).