



Hillsborough
County Florida

CAP Certification Form

This form and supporting information (if applicable) must be provided with Bid submission pursuant to Hillsborough County Ordinance No. 21-17.

Bidder's failure to complete the requirements of this form may result in the entire bid being rejected.

- a) By signing below, the Bidder certifies that:
- i. Bidder or its Subcontractors participate in an Apprenticeship program that is registered with the Florida Department of Education (FDOE) or the United States Department of Labor (USDOL); or
 - ii. There are no registered Apprenticeship programs for any type of work to be performed on the Construction Project, so Bidder or its Subcontractors will use a person participating in a company-sponsored training program to perform that type of Work on the Construction Project.
- b) Bidder must indicate how they plan to meet the requirement that 12% of labor hours on the construction project must be performed by Apprentices employed by Contractor or Subcontractor (See table below).
- c) Program Approval (select any that apply) and provide the program information along with this form with Bid submission:
- FDOE Approved
 - USDOL Approved
 - Company-sponsored (*For company-sponsored training programs, the program curriculum is required to be submitted for review and approval with the Bid submission and will be evaluated based on the US Department of Labor's Office of Apprenticeship Standards Builder User Guide.*)



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Project Labor Breakdown

Please indicate the estimated total labor hours for this project: _____

Please indicate the estimated labor hours dedicated to Hillsborough County DM/DWBE Subcontractors for this project (if applicable): _____

Please indicate the estimated labor hours dedicated to Hillsborough County SBE Subcontractors for this project (if applicable): _____

Please list all Trades, Contractors, Subcontractors, Apprenticeship Programs and Apprenticeship labor hours where applicable.

Trade (Name)	Contractor/Subcontractor (Name)	Apprenticeship Program (Name)	Apprentice Labor Hours

RFQ Number: _____

Company/Bidder Name: _____

Authorized Signature: _____

Date: _____



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(ACKNOWLEDGMENT OF CONTRACTOR, IF A CORPORATION)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization
this _____ day of _____, 20__ ,

by _____
(Name of person)

as _____ for _____
(i.e. Officer, attorney in fact) (Name of party on behalf of whom instrument was executed.)

(Signature of Notary Public)

(Print, Type, or Stamp Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____

(ACKNOWLEDGMENT OF CONTRACTOR, IF A PARTNERSHIP OR INDIVIDUAL)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization
this _____ day of _____, 20__ ,

by _____
(Name of person)

(Signature of Notary Public)

(Print, Type, or Stamp Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____