



PERSONAL CHARACTER FORM

1. Name of applicant: _____ Age: _____

2. Citizenship: _____

3. Date of Birth: _____

4. Race: _____

5. Social Security Number: _____

6. Home Address: _____

Home Phone: (____) _____ E-mail address _____

7. Name and address of stevedore firm which applicant will conduct his/her stevedoring activities upon issuance of license:

8. Prior stevedore's Performance Bond: _____

9. Has applicant ever been refused such bond?: _____

10. List all connections applicant has had with stevedoring and with shipping industry, giving dates and locations: _____

11. List all supervisory capacities previously held by applicant in No. 10:

12. Describe supervisory duties performed by applicant in No. 11:

13. List at least 3 local individual references and their addresses, of persons knowing applicant for two years or more:

Name _____
Address _____ Telephone ()-____-____

Name _____
Address _____ Telephone ()-____-____

Name _____
Address _____ Telephone ()-____-____

14. List all bank business accounts: _____

15. Education. List the name and address of high school, college, or specialty school attended, with dates of attendance and degrees, if any:

16. List any other information which applicants thinks might be of value to the Miami-Dade County Board of Commissioner's regarding this application:

DATE

SIGNATURE OF APPLICANT

STATE OF FLORIDA}

COUNTY OF MIAIMI-DADE}

Before me, the undersigned authority, duly authorized to
Give oaths and take acknowledgments, personally appeared _____

_____ who being sworn,
deposes and says that he is the person who executed the foregoing
Application For Stevedoring License, and that the matters and things
Therein contained are true and correct.

Witness my hand and official seal at _____,
Florida, this ____ day of _____, 20__.

Notary Public, State of Florida at Large

My commission expires: _____

(NOTARY SEAL)