



## CTQP Final Estimates Level 2 Prerequisite Affidavit

**Instructions:**

Complete the information below and return the form (and any required attachments) to [admin@ctqpflorida.com](mailto:admin@ctqpflorida.com)

Written Exam Information:

Date	Serial Number	Provider

I certify that I have a current (*Please select only one*):

- CTQP Final Estimates Level 1
- CTQP Final Estimates Level 2 (Renewal)

I have attached a copy of my current CTQP certificate noted above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

Drivers License Number	Date

\_\_\_\_\_  
Email