

**AUTHORIZATION FOR PARTIAL WAIVER
OF FLORIDA CHILD LABOR LAW**

Phone: 800.226.2536 or 850.488.3131
(press option 1 for Child Labor)

Email: Childlaborwaivers@myfloridalicense.com

**INSTRUCTIONS
APPLICATION FOR GAS/OXYGEN WAIVER**

The Florida Administrative Code (FAC) 61L-2005(3), which limits minors from dispensing and transporting compressed air that exceeds 40 pounds per square inch (psi), is waived for the minors listed below who have completed an approved training program, and the parent or guardian has been notified that the minor may be operating this equipment. The waiver is limited to the use of supplemental oxygen units commonly used in life guarding or similar aquatics lifesaving positions and only while performing their job duties. The employer must remain in compliance with all other provisions of the Child Labor Statute, except that which is specified above.

These waivers all minors, who have completed an appropriate safety training course, to dispense supplemental oxygen as part of their employment responsibilities when employed as lifeguards or in similar aquatics lifesaving positions. Without a waiver, minors would not otherwise be able to use this lifesaving equipment during employment as lifeguards or in similar aquatics lifesaving positions.

Please fill out the following information listed on the second page of this application:

1. Employer Waiver# (if applicable)
2. Check New Waiver **OR** Renewal Waiver
3. Company name
4. Employer contact name
5. Employer address
6. FEIN#
7. Employer phone number
8. Employer email
9. Name and date of birth for each minor (include waiver# if rehired from previous year)
10. Check Yes or No if Parental Notification has been provided
11. Enter training provider
12. Enter date of training
13. Employer signature
14. Date
15. Provide supporting documents:
 - a. Lifeguard certification for each minor
 - b. Proof of age for each minor

Note: It is required to list all information on the waiver application form. If additional pages are needed, please make copies of pages 1 or 2 of the application.

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DBPR Use Only

Employer Waiver#:	
Expiration Date:	

<input type="checkbox"/> New Waiver		<input type="checkbox"/> Renewal Waiver	
Company Name:		Employer Contact Name:	
Employer Address:		FEIN#:	
Employer Phone Number:		Employer Email:	

Name of Minor (Type or Print)	Date of Birth	Parental Notification		Training Provider	Date of Training	Waiver# <i>DBPR use only</i>	Waiver Expiration Date <i>DBPR use only</i>
		Yes	No				
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By signing the authorization, the employer verifies that the minors listed have completed the above training program and the parent or guardian has been notified. This document will then serve as an approved waiver for the minors listed, unless notified by the Child Labor section. Employers are required to keep copies of the parental letter, proof of training, and waiver while minors are employed for enforcement purposes. The waiver will be valid for one year from the date received in this office.

Employer Signature

Date

Name of Minor (Type or Print)	Date of Birth	Parental Notification		Training Provider	Date of Training	Waiver# <small>DBPR use only</small>	Waiver Expiration Date <small>DBPR use only</small>
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