

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 32376 CONTRACTOR J. RYAN HURST PHONE 904.626.8813

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
MECHANICAL/ A/C _____	Print Name _____ License # _____	Signature _____ Phone # _____
PLUMBING/ GAS	Print Name _____ License # _____	Signature _____ Phone # _____
ROOFING	Print Name _____ License # _____	Signature _____ Phone # _____
SHEET METAL	Print Name _____ License # _____	Signature _____ Phone # _____
FIRE SUPPRESSION WOOD SYSTEM	Print Name _____ License # _____	Signature _____ Phone # _____
FOR CEILING ENERG	Print Name <u>JAMES R. HODGE</u> License # <u>05964-0002-1985</u>	Signature <u>[Signature]</u> Phone # <u>352.377.3473</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 32376 CONTRACTOR J. RYAN HUNTS PHONE 904.626.8813
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

1573

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
MECHANICAL/ A/C	Print Name _____ License # _____	Signature _____ Phone # _____
PLUMBING/ GAS	Print Name <u>LATIMY, DEAN</u> License # <u>CFC 056659</u>	Signature <u>[Signature]</u> Phone # <u>904.346.1266</u>
ROOFING	Print Name _____ License # _____	Signature _____ Phone # _____
SHEET METAL	Print Name _____ License # _____	Signature _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License # _____	Signature _____ Phone # _____
SOLAR	Print Name _____ License # _____	Signature _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit. Return to: 386.758.2166

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1406-57 CONTRACTOR Hurst Contracting PHONE 904.626.8813
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
MECHANICAL/ A/C _____	Print Name _____ License # _____	Signature _____ Phone # _____
PLUMBING/ GAS _____	Print Name _____ License # _____	Signature _____ Phone # _____
✓ ROOFING 1515	Print Name <u>Roland Keith Green</u> License # <u>CCC1329894</u>	Signature <u>[Signature]</u> Phone # <u>904-751-0840</u>
SHEET METAL	Print Name _____ License # _____	Signature _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License # _____	Signature _____ Phone # _____
SOLAR	Print Name _____ License # _____	Signature _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss 440 10 and 440 38, and shall be presented each time the employer applies for a building permit

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1466 57

CONTRACTOR J. Ryals Hurst

PHONE 904.626.8813

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
✓ MECHANICAL/ A/C 1511	Print Name <u>RICKY D HURST</u> License # <u>CA1118 42</u>	Signature <u>[Signature]</u> Phone # <u>904 262 4271</u>
PLUMBING/ GAS	Print Name _____ License # _____	Signature _____ Phone # _____
ROOFING	Print Name _____ License # _____	Signature _____ Phone # _____
SHEET METAL	Print Name _____ License # _____	Signature _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License # _____	Signature _____ Phone # _____
SOLAR	Print Name _____ License # _____	Signature _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy. Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

LOCATION NUMBER 1406-57 CONTRACTOR Hurst RYALS PHONE 904626 8813
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

☒ ELECTRICAL 1508	Print Name <u>STUART JONES</u> License #: <u>EC 1390 3271</u>	Signature <u>[Signature]</u> Phone #: <u>11</u>
☐ MECHANICAL/ A/C	Print Name <u>SEE ATTACHED V7</u> License #:	Signature <u>[Signature]</u> Phone #:
☒ PLUMBING/ GAS 1517	Print Name <u>Chris Ashley</u> License #: <u>CFC057804</u>	Signature <u>[Signature]</u> Phone #: <u>330-7959</u>
☐ ROOFING	Print Name License #	Signature Phone #
☐ SHEET METAL Roc F	Print Name <u>SEE ATTACHED V7</u> Licen	Signature Phone #
☒ FIRE SYSTEM/ SPRINKLER 1508	Print Name <u>ROBERT MATTHEWS</u> License #: <u>BT0104-0001-2000</u>	Signature <u>[Signature]</u> Phone #: <u>904-743-3220</u>
☐ SOLAR	Print Name License #	Signature Phone #

Specialty/License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
☒ MASON 1507	<u>C</u>	<u>↑</u>	<u>[Signature]</u>
☒ CONCRETE FINISHER 1507	<u>1507</u>	<u>↑</u>	<u>[Signature]</u>
☒ FRAMING 1507	<u>CGC1508745</u>	<u>Hurst Contracting Inc</u>	<u>[Signature]</u>
☒ INSULATION 1507	<u>CGC1508745</u>	<u>Hurst Contracting Inc.</u>	<u>[Signature]</u>
☒ STUCCO 1507	<u>CGC1508745</u>	<u>Hurst Contracting Inc</u>	<u>[Signature]</u>
☒ DRYWALL 1507	<u>CGC1508745</u>	<u>" "</u>	<u>" "</u>
☐ PLASTER	<u>---</u>	<u>---</u>	<u>---</u>
☐ CABINET INSTALLER	<u>---</u>	<u>---</u>	<u>---</u>
☒ PAINTING 1507	<u>CGC1508745</u>	<u>Hurst Contracting Inc.</u>	<u>[Signature]</u>
☒ ACOUSTICAL CEILING 1507	<u>---</u>	<u>---</u>	<u>---</u>
☒ GLASS 1507	<u>---</u>	<u>---</u>	<u>---</u>
☒ CERAMIC TILE 1507	<u>---</u>	<u>---</u>	<u>---</u>
☒ FLOOR COVERING 1507	<u>---</u>	<u>---</u>	<u>[Signature]</u>
☐ ALUM/VINYL SIDING	<u>---</u>	<u>---</u>	<u>---</u>
☐ GARAGE DOOR	<u>---</u>	<u>---</u>	<u>---</u>
☐ METAL BLDG ERECTOR	<u>---</u>	<u>---</u>	<u>---</u>

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.