

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1354-06 CONTRACTOR Don Reed PHONE 386-752-4072
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.

<input checked="" type="checkbox"/> ELECTRICAL 380	Print Name <u>Donnie Davis</u> License #: <u>EC-0002306</u>	Signature <u>Donnie Davis</u> Phone #: <u>386-454-1407</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C 568	Print Name <u>Dan Hall</u> License #: <u>CAC 057424</u>	Signature <u>[Signature]</u> Phone #: <u>386-755-9792</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS 441	Print Name <u>Joe Davis</u> License #: <u>CFCO-57304</u>	Signature <u>[Signature]</u> Phone #: <u>386-454-1407</u>
<input checked="" type="checkbox"/> ROOFING 626	Print Name <u>Don Reed</u> License #: <u>CCC1330117</u>	Signature _____ Phone #: <u>Don Reed 752-4072</u>
SHEET METAL	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<input checked="" type="checkbox"/> MASON	<u>000246</u>	<u>Ed Denmark</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	<u>1349</u>	<u>Scott Reeves</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> FRAMING	<u>CGC036224</u>	<u>Don Reed Construction</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> INSULATION	<u>#00240</u>	<u>Sykes, Will</u>	<u>[Signature]</u>
STUCCO	_____	_____	_____
<input checked="" type="checkbox"/> DRYWALL	<u>2-260</u>	<u>Jesse Erccoli</u>	<u>[Signature]</u>
PLASTER	_____	<u>N/A</u>	_____
<input checked="" type="checkbox"/> CABINET INSTALLER	<u>000245</u>	<u>Craig Moorman</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> PAINTING	<u>000180</u>	<u>Scott Vogel</u>	<u>[Signature]</u>
ACOUSTICAL CEILING	_____	<u>N/A</u>	_____
GLASS	_____	<u>N/A</u>	_____
CERAMIC TILE	_____	_____	_____
<input checked="" type="checkbox"/> FLOOR COVERING	<u>000710</u>	<u>Brown Yann</u>	<u>[Signature]</u>
ALUM/VINYL SIDING	_____	<u>N/A</u>	_____
<input checked="" type="checkbox"/> GARAGE DOOR	<u>000619</u>	<u>Carl Bullard</u>	<u>[Signature]</u>
METAL BLDG ERECTOR	_____	<u>N/A</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.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1364-06 CONTRACTOR Don Beed Construction PHONE 752-4072
 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 fines.

ELECTRICAL	Print Name <u>HSE - Donn</u> License #: <u>2306</u>	758-2160 Duane Summerlin Signature ☺
MECHANICAL/ A/C	Print Name <u>David Hall HV</u> License #: <u>57424</u>	
PLUMBING/ GAS	Print Name <u>HSP - Joe Da</u> License #: <u>57304</u>	
ROOFING	Print Name <u>DRC</u> License #: <u>CGC 036221</u>	
SHEET METAL	Print Name <u>N/A</u> License #:	
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License#:	
SOLAR	Print Name <u>N/A</u> License #:	

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	#246	Ed Dannaud	<i>[Signature]</i>
CONCRETE FINISHER	#1349	Scott Reeves	<i>[Signature]</i>
FRAMING		DRC	
INSULATION	#240	Will Sykes	Will Sykes
STUCCO		N/A	
DRYWALL	#260	L.C. Drywall Jesse Erroll	<i>[Signature]</i>
PLASTER		N/A	
CABINET INSTALLER	#245	Craig Moorman	
PAINTING	#180	Scott Vogel	
ACOUSTICAL CEILING		N/A	
GLASS		N/A	
✓ CERAMIC TILE	#640	Duane Summerlin	<i>[Signature]</i>
FLOOR COVERING	00710	Brown Vann	<i>[Signature]</i>
ALUM/VINYL SIDING	#166	Mike Nicholson	
GARAGE DOOR	#619	L.C. Glass	
METAL BLDG ERECTOR		N/A	

F. 5. 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.