

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1408-01 CONTRACTOR Scott Case PHONE 561-202-7603
 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 <u>MATT BURNS</u> Signature <u>Matt Burns</u>
	License # <u>ER 13013004</u> Phone # <u>386-368-3688</u>
☒ MECHANICAL/A/C	Print Name <u>Towson Hawthorn A/R</u> Signature <u>Towson Hawthorn</u>
	License # <u>CR 0088741</u> Phone # <u>386-362-4509</u>
☒ PLUMBING/GAS	Print Name <u>Oliver Scott Case</u> Signature <u>Oliver Scott Case</u>
	License # <u></u> Phone # <u></u>
☒ ROOFING	Print Name <u>George Duckworth</u> Signature <u>George Duckworth</u>
	License # <u>CC 1307937</u> Phone # <u>386-208-9117</u>
☐ SHEET METAL	Print Name <u></u> Signature <u></u>
	License # <u></u> Phone # <u></u>
☐ FIRE SYSTEM/SPRINKLER	Print Name <u></u> Signature <u></u>
	License # <u></u> Phone # <u></u>
☐ SOLAR	Print Name <u></u> Signature <u></u>
	License # <u></u> Phone # <u></u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	☒ owner	<u>D. Scott Case</u>	<u>Oliver Scott Case</u>
CONCRETE FINISHER	☐		
FRAMING	☐		
INSULATION	☐		
STUCCO	☐		
DRYWALL	☐		
PLASTER	☐		
CABINET INSTALLER	☐		
PAINTING	☐		
ACOUSTICAL CEILING	☐		
GLASS	☐		
CERAMIC TILE	☐		
FLOOR COVERING	☐		
ALUM/VINYL SIDING	☐		
GARAGE DOOR	☐		
METAL BLDG DIRECTOR	☒		

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.

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ELECTRICAL	Print Name <u>MATT BURNS</u> Signature _____ License # <u>ER 13013004</u> Phone # <u>386-365-3688</u>
MECHANICAL/ A/C	Print Name <u>Touhson Heating & AIR</u> Signature _____ License # <u>CAC088747</u> Phone # <u>386-362-4509</u>
PLUMBING/ GAS	Print Name <u>owner Scott Case</u> Signature <u>Scott Case</u> License # _____ Phone # _____
ROOFING	Print Name <u>George Ducksworth</u> Signature _____ License # <u>CCC1307937</u> Phone # <u>386-208-9117</u>
SHEET METAL	Print Name _____ Signature _____ License # _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ Signature _____ License # _____ Phone # _____
SOLAR	Print Name _____ Signature _____ License # _____ Phone # _____

Specialty/License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	☒ owner	☒ Scott Case	<u>Scott Case</u>
CONCRETE FINISHER	☐	☐	
FRAMING	☐	☐	OWNER BLDG
INSULATION	☐	☐	
STUCCO	☐	☐	
DRYWALL	☐	☐	
PLASTER	☐	☐	
CABINET INSTALLER	☐	☐	
PAINTING	☐	☐	
ACOUSTICAL CEILING	☐	☐	
GLASS	☐	☐	
CERAMIC TILE	☐	☐	
FLOOR COVERING	☐	☐	
ALUM/VINYL SIDING	☐	☐	
GARAGE DOOR	☐	☐	
METAL BLDG DIRECTOR	☒	☐	

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