

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1408-28 CONTRACTOR STELLAR GROUP, INC. PHONE (904) 899-9260
 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 1553	Print Name <u>YUTAN CAMPBELL</u> License #: <u>CFC 1426177</u>	Signature <u>[Signature]</u> Phone #: <u>904-376-5880</u>
ROOFING	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	_____	<u>N/A</u>	_____
CONCRETE FINISHER	_____	<u>N/A</u>	_____
FRAMING	_____		
INSULATION	_____		
STUCCO	_____	<u>N/A</u>	_____
DRYWALL	_____		
PLASTER	_____	<u>N/A</u>	_____
CABINET INSTALLER	_____		
PAINTING	_____		
ACOUSTICAL CEILING	_____		
GLASS	_____		
CERAMIC TILE	_____		
FLOOR COVERING	_____		
ALUM/VINYL SIDING	_____	<u>N/A</u>	_____
GARAGE DOOR	_____	<u>N/A</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.

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ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: <u>Bill Williams A/C & HEATING, INC.</u>	Signature _____ Phone #: _____
PLUMBING	Print Name <u>Benjamin G. Chism</u> License #: <u>CAC 057923</u>	Signature <u>[Signature]</u> Phone #: <u>904-387-0491</u>
ROOFING	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____

1552 ✓

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON	_____	<u>N/A</u>	_____
CONCRETE FINISHER	_____	<u>N/A</u>	_____
FRAMING	_____	_____	_____
INSULATION	_____	_____	_____
STUCCO	_____	<u>N/A</u>	_____
DRYWALL	_____	_____	_____
PLASTER	_____	<u>N/A</u>	_____
CABINET INSTALLER	_____	_____	_____
PAINTING	_____	_____	_____
ACOUSTICAL CEILING	_____	_____	_____
GLASS	_____	_____	_____
CERAMIC TILE	_____	_____	_____
FLOOR COVERING	_____	_____	_____
ALUM/VINYL SIDING	_____	<u>N/A</u>	_____
GARAGE DOOR	_____	<u>N/A</u>	_____
METAL BLDG ERECTOR	_____	<u>N/A</u>	_____

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APPLICATION NUMBER 1408-28 CONTRACTOR S. R. G. S. PHONE 1

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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 SYSTEM/ SPRINKLER	Print Name <u>Robert B. Cariveau</u> License # <u>14517900012009</u>	Signature <u>Robert B. Cariveau</u> Phone # <u>(904) 404-3472</u>
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			

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✓ ELECTRICAL 1078	Print Name	<u>Douglas B Smith</u>	Signature	<u>[Signature]</u>
	License #	<u>EC0002620</u>	Phone #:	<u>904 757 1126</u>
MECHANICAL/ A/C	Print Name		Signature	
	License #		Phone #:	
PLUMBING/ GAS	Print Name		Signature	
	License #:		Phone #:	
ROOFING	Print Name	<u>N/A</u>	Signature	
	License #		Phone #:	
SHEET METAL	Print Name	<u>N/A</u>	Signature	
	License #.		Phone #.	
FIRE SYSTEM/ SPRINKLER	Print Name		Signature	
	License#		Phone #:	
SOLAR	Print Name	<u>N/A</u>	Signature	
	License #.		Phone #:	

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

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