

# Mobile Home Subcontractor Verification Form

APPLICATION/PERMIT # \_\_\_\_\_

JOB NAME Spradley

**THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED**

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 State License to Columbia County Building Department prior to permit issuance.

***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**

Printed Name: Donnie Skipper Signature: Donnie Skipper  
Company Name: Donnie Skipper Mechanical & Electrical Owner   
License #: ER0010007 Phone #: 386-755-6744

**MECHANICAL / A/C**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

***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**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

**MECHANICAL / A/C**

Printed Name: Steven Mollman Signature: Steven Mollman  
Company Name: Mollman A/C & Heat Owner   
License #: CAC1819696 Phone #: 352-339-6640

### ***F.S. 440.103 Building permits; identification of minimum premium policy.--***

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