

# Subcontractor Verification Form

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME \_\_\_\_\_

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

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the General Contractor's permit.

**NOTE:** It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

**NOTE:** If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

**ELECTRICAL**

Printed Name: Robert Lynch Signature: [Signature]  
 Company Name: Third Day Electric Inc Owner   
 License #: EC13001947 Phone #: 561-935-8450

**MECHANICAL / HVAC**

Printed Name: TIMOTHY D. SHATTO Signature: [Signature]  
 Company Name: SHATTO HEATING & AIR Owner   
 License #: CAC057875 Phone #: 386-496-8229

**PLUMBING / GAS**

Printed Name: Cody Barrs Signature: [Signature]  
 Company Name: Barrs Plumbing Owner   
 License #: CEC1487145 Phone #: 386-752-8686

**ROOFING**

Printed Name: Abriha M. Sibel Signature: [Signature]  
 Company Name: BSH Construction Owner   
 License #: CCC1331967 Phone #: (386) 209-0787

**FIRE SYSTEMS / SPRINKLER**

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

**SOLAR**

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

**STATE SPECIALTY**

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