

# Subcontractor Verification Form

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME Fleming/O' Quinn

**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 is **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.

<b>ELECTRICAL</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____
<b>MECHANICAL / A/C</b>	Printed Name: <u>Jesus Morfa</u> Signature: <u>[Signature]</u> Company Name: <u>Mini Split Kings</u> Owner <input checked="" type="checkbox"/> License #: <u>CAC 1823571</u> Phone #: <u>407.439.5464</u>
<b>PLUMBING / GAS</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____
<b>ROOFING</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____
<b>FIRE SYSTEM / SPRINKLER</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____
<b>SOLAR</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____
<b>STATE SPECIALTY</b>	Printed Name: _____ Signature: _____ Company Name: _____ Owner <input type="checkbox"/> License #: _____ Phone #: _____