



**Columbia County Building Department**  
 135 NE Hernando Ave, Suite B-21  
 Lake City, FL 32055  
 Phone: 386.758.1008

Please email request to [bldginfo@columbiacountyfla.com](mailto:bldginfo@columbiacountyfla.com)

## Change of Subcontractor Request

### Permit Information

- Permit #: 54839
  - Property Owner: GATOR LAND DEVELOPMENT
  - Job Site Address: 119 SW IVY GLN  
LAKE CITY, FL 32024
  - Original Subcontractor: COCHRAN PLUMBING SERVICES
  - License #: CFC1429154
  - New Subcontractor: BARRS PLUMBING
  - License #: CFC1427145
- Trade (i.e. Electrical, Plumbing, HVAC, etc.): PLUMBING

<b>FOR OFFICE USE</b>	
DATE RECEIVED:	<u>6-3-26</u>
<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
COMPLETED CHANGE:	<input checked="" type="checkbox"/> YES
DATE PROCESSED:	
PROCESSED BY:	<u>Emaleigh Ward</u>
NOTES:	

### Reason for Change:

NOT USING COCHRAN ANYMORE

### Required Documents:

- Subcontractor MUST be on file with our jurisdiction. If not, complete registration by making application @ <https://www.columbiacountyfla.com/PermitSearch/MyBNZPortalLogin.aspx>
- New signed Subcontractor Form

### Hold Harmless Acknowledgement

The undersigned agree to hold harmless and indemnify Columbia County and its agents from any claims or liability resulting from this change of subcontractor.

### Signatures (All must be notarized)

- **Property Owner (If Owner-Builder)**

Printed Name: LORA L DAVID Date: 4/15/26

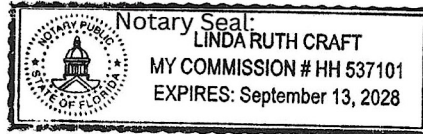
Signature: [Handwritten Signature]

State: FLORIDA County: COLUMBIA

The foregoing instrument was acknowledged before me, by means of  physical presence or  online notarization, this 15 day of APRIL, 20 26, by LORA L DAVID, who is  personally known to me or  has provided the following identification: \_\_\_\_\_

Notary Printed Name: LINDA RUTH CRAFT

Notary Signature: [Handwritten Signature]



- **General Contractor**

Printed Name: BENCHMARK BUILDERS, LLC Date: 4/15/26

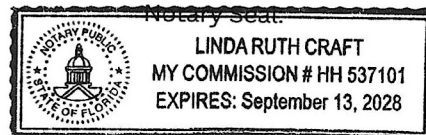
Signature: [Handwritten Signature]

State: FLORIDA County: COLUMBIA

The foregoing instrument was acknowledged before me, by means of  physical presence or  online notarization, this 15 day of APRIL, 20 26, by JOSEPH PEURRUNG, who is  personally known to me or  has provided the following identification: \_\_\_\_\_

Notary Printed Name: LINDA RUTH CRAFT

Notary Signature: [Handwritten Signature]



**Published 10/2025**

# Subcontractor Verification Form

APPLICATION/PERMIT # 54839

JOB NAME LOT 10

**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.

**ELECTRICAL**

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

**MECHANICAL / A/C**

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

**PLUMBING / GAS**

Printed Name: Cody Barrs Signature: C  
Company Name: Barrs Plumbing Owner   
License #: CFC1427145 Phone #: 386-752-8656

**ROOFING**

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

**FIRE SYSTEM /  
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 #: \_\_\_\_\_