

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____

JOB NAME **Feagin Custom Home** *(Signature)*

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 contractors 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.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

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		Print Name <u>Joel Feagin</u> Signature <u>Joel Feagin</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____		Company Name: <u>Feagin Total Communications, Inc.</u>	
A/C _____		License #: <u>EC13010457</u> Phone #: <u>352-281-2189</u>	
MECHANICAL/		Print Name <u>Timothy D. Shatto</u> Signature <u>Timothy D. Shatto</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# <u>130</u>		Company Name: <u>Shatto Heating & Air, Inc</u>	
A/C _____		License #: <u>CAC057875</u> Phone #: <u>386-496-8224</u>	
PLUMBING/		Print Name <u>Clayton Davis</u> Signature <u>Clayton Davis</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
GAS		Company Name: <u>Davis Brothers Alachua Plumbing</u>	
CC# _____		License #: <u>CFC1429590</u> Phone #: <u>386-462-3407</u>	
ROOFING		Print Name <u>Benjamin Keefer</u> Signature <u>Benjamin Keefer</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____		Company Name: <u>Keefer Roofing</u>	
CC# _____		License #: <u>CCC1330509</u> Phone #: <u>(352) 514-4930</u>	
SHEET METAL		Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____		Company Name: _____	
CC# _____		License #: _____ Phone #: _____	
FIRE SYSTEM/		Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SPRINKLER		Company Name: _____	
CC# _____		License #: _____ Phone #: _____	
SOLAR		Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____		Company Name: _____	
CC# _____		License #: _____ Phone #: _____	
STATE		Print Name <u>TERRY MAULDIN</u> Signature <u>Terry Mauldin</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SPECIALTY		Company Name: <u>MAULDIN'S GAS SERVICE</u>	
CC# _____		License #: <u>LI39428</u> Phone #: <u>352-221-4931</u>	