

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR Jason Elissen	Const. Lic	PHONE 386-623-174			
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT						

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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 Certificate of Competency license in Columbia County.

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	Print Name	Signature Phone #:
MECHANICAL/ A/C	Print NameLicense #:	
PLUMBING/ GAS	Print NameLicense #:	SignaturePhone #:
ROOFING	Print Name Jasan Elizen Construction License #: CCC1325779	Signature Parone #: 386-623-1741
SHEET METAL	Print NameLicense #:	
FIRE SYSTEM/ SPRINKLER	Print NameLicense#:	SignaturePhone #:
SOLAR	Print NameLicense #:	SignaturePhone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING *	CBC1250331	Jason Elixson	
INSULATION		2 - C/1 X301	-
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING	NIA		
ACOUSTICAL CEILING			
GLASS			***************************************
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Contractor Forms: Subcontractor form: 6/09