

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME _____

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

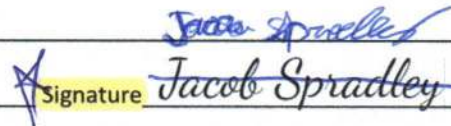
Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

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 ☒ X CC# _____	Print Name <u>Jacob Spradley</u> Company Name: _____ License #: _____ Phone #: <u>386-365-7397</u>	 Signature <u>Jacob Spradley</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
MECHANICAL CC# _____	Name _____ Signature _____ Company Name: _____ Phone #: _____		Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/ GAS CC# _____	Print Name _____ Company Name: _____ License #: _____ Phone #: _____	Signature _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING CC# _____	Print Name _____ Company Name: _____ License #: _____	Signature _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SHEET METAL CC# _____	Print Name _____ Company Name: _____ License #: _____		Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
FIRE SYSTEM/ SPRINKLER CC# _____	Print Name _____ Company Name: _____ License #: _____ Phone #: _____		Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SOLAR CC# _____	Print Name _____ Company Name: _____ License #: _____ Phone #: _____	Signature _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
STATE SPECIALTY CC# _____	Name: _____ License #: _____ Phone #: _____	Signature _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE