

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1307-05

CONTRACTOR

Raymond O. Peden

PHONE

755 2848

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 REQUIRED 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 _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
✓ PLASTER 1138	1138	James Ladgett	* James Peden
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.109 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.

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Mar 19 10 01:29p

Raymond Peeler

386-755-5577

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SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1207-05

CONTRACTOR

Raymond Peeler

PHONE

755-2848

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ELECTRICAL

Print Name

Craig Holder

Signature



License #:

ER 0014642

Phone #:

397 3810

MECHANICAL/
A/C

Print Name

Signature

License #:

Phone #:

PLUMBING/
GAS

Print Name

Signature

License #:

Phone #:

ROOFING

Print Name

Signature

License #:

Phone #:

SHEET METAL

Print Name

Signature

License #:

Phone #:

FIRE SYSTEM/
SPRINKLER

Print Name

Signature

License #:

Phone #:

SOLAR

Print Name

Signature

License #:

Phone #:

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

See your pool professional or follow the manufacturer's instructions found on the product.

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition of applying for and receiving a building permit, provide proof of a minimum premium policy to the permit issuer and shall be presented for compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented for time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1307-05 CONTRACTOR Raymond Peeler PHONE 386-7552848

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 **REQUIRED** 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.

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MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
✓ CONCRETE FINISHER	001349	Gregory Scott Reeves	X Gregory Scott Reeves
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
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.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1307-05

CONTRACTOR

Raymond Fleeter

PHONE

755-3848

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

MASON			
CONCRETE FINISHER	856	Jeff Nylander	2449 11/10
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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Continued Page 2 of 2 Subcontractor Form 12/00