

Florida Mobile Home Installer License

LICENSEE JEFFREY C. WAGNER LICENSE NUMBER: 1H/1025438 EFFECTIVEDATE: 09/25/2019

EXPIRATION DATE: 09/30/2020

THE LICENSEE IS HEREBY GERTIFIED UNDER THE PROVISIONS OF SECTION 920, 8249, PLOSIDA STATUTES TO CONDUCT AND CARRY ON BUSINESS AS AN INSTALLER OF MOBILE HOMES IN THE STATE OF FLORIDA

Roll R Kyml

Director, Division of Motorist Services
State of Florida - Department of Highway Safety and Motor Whiteles - Division of Motorist Services

Contractor Changed 10/14 MG

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION N	NUMBER 38603 CONTRACTOR JEFFED CWAGNER PHONE 813659
Ch	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT ANGLE MELLAWERL CONTRACTOR
In Columbia (records of th Ordinance 89	County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have e subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 9-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or eneral liability insurance and a valid Certificate of Competency license in Columbia County.
Any changes, start of that s	the permitted contractor is responsible for the corrected form being submitted to this office prior to the subcontractor beginning any work. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name Signature
	License #: Phone #:
	Qualifier Form Attached
MECHANICAL/	Print Name ALAMERICAN AIR CONDITIONING Signature Steve Chapma License #: CAC 57680 Phone #: 904 461 0070
Dago	Qualifier Form Attached
compensation	Suilding permits; identification of minimum premium policyEvery employer shall, as a condition to differentiation of minimum premium policyEvery employer shall, as a condition to differentiate permit, show proof and certify to the permit issuer that it has secured for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each yer applies for a building permit. Shall yeur applies for a building permit.

Need More

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1908-86 CONTRACTOR JEFF Wagner PHONE 813-6559 0615

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 of 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.

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	ELECTRICAL	Print Name (104/185 San Elichia Stendard)
		License #. E C U U U U 175 Phone # 813-932-7146
V	1951	Qualifier Form Attacheti []
NORF	MECHANICAL/	Print Name_JOUNES BIGURD Signature_CLUC License #CP @ 1810 13 S Phone #
N.	2037	Qualifier Form Attache
Klo	A	Replace With AI american aur Conditionias
	F. S. 440.103 B	wilding permits: identification of minimum as a

F. 5. 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

356-758-1008

Adwred Meed Saldball O. Flat, Com

Revised 4/27/2017

Licensee Details

Licensee Information

Name: CHAPMAN, STEPHEN RANDALL (Primary Name)

ALL AMERICAN AIR CONDITIONING & HEATING

CONTRACTORS INC (DBA Name)

Main Address: 1010 STATE ROAD 312

ST AUGUSTINE Florida 32084

County: ST. JOHNS

License Mailing:

LicenseLocation: 1010 ST RD 312

ST AUGUSTINE FL 32084

County: ST. JOHNS

License Information

License Type: Certified Air Conditioning Contractor

Rank: Cert Air
License Number: CAC0576

License Number: CAC057680
Status: Current,Active

Licensure Date: 06/03/1998

Expires: **08/31/2020**

Special Qualifications Qualification Effective

Class B

Construction Business 02/20/2004

Alternate Names

<u>View Related License Information</u> <u>View License Complaint</u>

2601 Blair Stone Road, Tallahassee FL 32399 :: Email: Customer Contact Center: :: Customer Contact Center: 850.487.1395

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