JOB NAME FIVE POINTS RESTROOM

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 <u>REQUIRED</u> 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.

	1 2	
ELECTRICAL	Print Name WALTER GRAHAM Signature Walter Office	<u>Need</u> □ Lic
V	Company Name: GRAHAM & SONS ELECTRIC INC.	□ Liab
	CONTROL OF MANAGEMENT OF THE CONTROL	□ W/C
CC#	License #: EC#0000683 Phone #: 386-752-6082	□ DE
MECHANICAL/	Print Name Signature	<u>Need</u> □ Lic
A/C	Company Name:	□ Liab □ W/C
CC#	License #: Phone #:	□ EX □ DE
PLUMBING/	Print Name Signature	Need
GAS	Company Name:	□ Liab □ W/C
CC#	License #: Phone #:	□ W/C □ EX □ DE
ROOFING	Print NameSignature	Need
	Company Name:	□ Liab
CC#	License #: Phone #:	□ W/C □ EX □ DE
SHEET METAL	Print NameSignature	Need
	Company Name:	□ Liab
CC#	License #: Phone #:	□ EX
FIRE SYSTEM/	Print NameSignature	Need .
SPRINKLER	Company Name:	□ Liab
CC#	License#: Phone #:	□ EX
SOLAR		☐ DE Need
	Print NameSignature	□ Lic □ Liab
	Company Name:	□ w/c
CC#	License #: Phone #:	□ EX □ DE
STATE	Print Name Signature	<u>Need</u> □ Lic
SPECIALTY	4	□ Liab
The second secon	Company Name:	□ W/c □ EX
CC#	License #: Phone #:	□ DE

SUBCONTRACTOR VERIFICATION

JOB NAME	
	JOB NAME

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ELECTRICAL	Print NameSignature		Need Lic Liab
L	Company Name:		□ W/C
CC#	License #: Phone #:		□ DE
MECHANICAL/			Need Uc
A/C	Company Name:		□ Liab □ W/c
CC#	License #: Phone #:		□ EX
PLUMBING/	Print Name Cody Barrs Signature Signature		Need D Lic
GAS	Company Name: BARRS Mumbing, INC		□ Liab □ W/C
CC#	License #: CFC 1427145 Phone #: (386)67	23-0509	□ EX □ DE
ROOFING	Brint Nama		Need
ROOFING	Print NameSignature		□ Lic
	Company Name:		□ Uab
CC#	License #: Phone #:		D EX
SHEET METAL	Print NameSignature		Need D Lic
	Company Name:		□ Liab
CC#	License #: Phone #:		D EX
FIRE SYSTEM/	Print NameSignature		Need
SPRINKLER	Company Name:		□ Llab □ W/C
CC#	License#: Phone #:		DE EX
SOLAR	Print NameSignature		Need
	Company Name:		□ Liab □ W/C
CC#	License #:Phone #:		□ EX
STATE	Print Name Signature		Need Uc
SPECIALTY	Company Name:		□ Uab
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