

**SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER

1203-27

CONTRACTOR EDGLEY CONSTRUCTION

PHONE 752-0580

**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.**

<input checked="" type="checkbox"/> <b>ELECTRICAL</b> <u>564</u>	Print Name <u>WALTER GRAHAM</u> License #: <u>EC #0000683</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-6082</u>
<input checked="" type="checkbox"/> <b>MECHANICAL/A/C</b> <u>138</u>	Print Name <u>LAMAR BOOZER</u> License #: <u>RA0035027</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-6700</u>
<input checked="" type="checkbox"/> <b>PLUMBING/GAS</b> <u>719</u>	Print Name <u>MARK BARRS</u> License #: <u>CFC057219</u> <u>Liab. 73.30.12</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-8656</u>
<input checked="" type="checkbox"/> <b>ROOFING</b>	Print Name <u>WILLIAM PEELER</u> License #: <u>HOMEOWNER</u>	Signature <u>[Signature]</u> Phone #:
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #:
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #:
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<input checked="" type="checkbox"/> MASON	000620	BRANT STEVENS	<u>[Signature]</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	000028	ALTON "BUTCH" VAUGHN	<u>[Signature]</u>
<input checked="" type="checkbox"/> FRAMING <u>289</u>	RG0066597	JOHN NORRIS	<u>[Signature]</u>
<input checked="" type="checkbox"/> INSULATION	000240	WILLIAM SIKES	<u>[Signature]</u>
STUCCO	_____	_____	_____
<input checked="" type="checkbox"/> DRYWALL	001177	JOSEPH AMBROS	<u>[Signature]</u>
PLASTER	_____	_____	_____
<input checked="" type="checkbox"/> CABINET INSTALLER	HOMEOWNER	WILLIAM PEELER	<u>[Signature]</u>
<input checked="" type="checkbox"/> PAINTING	HOMEOWNER	WILLIAM PEELER	<u>[Signature]</u>
ACOUSTICAL CEILING	_____	_____	_____
<input checked="" type="checkbox"/> GLASS	000618	CARL BULLARD JR	<u>[Signature]</u>
<input checked="" type="checkbox"/> CERAMIC TILE	HOMEOWNER	WILLIAM PEELER	<u>[Signature]</u>
<input checked="" type="checkbox"/> FLOOR COVERING	000546	RYAN HARDING	<u>[Signature]</u>
<input checked="" type="checkbox"/> ALUM/VINYL SIDING	001214	JONATHAN NORRIS	<u>[Signature]</u>
<input checked="" type="checkbox"/> GARAGE DOOR	000619	CARL BULLARD JR	<u>[Signature]</u>
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.