

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 60735

JOB NAME Duke Energy Fort White Microwave Tower

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 ☒	Print Name <u>Charles W. Berlinghoff</u> Signature <u><i>Charles W. Berlinghoff</i></u> Company Name: <u>Florida Tel-Con, Inc.</u> License #: <u>EC0001722</u> Phone #: <u>904-529-5200</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
MECHANICAL/A/C ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/GAS ☒	Print Name <u>Ronald David Mosley Jr.</u> Signature <u><i>Ronald Mosley Jr.</i></u> Company Name: <u>1st Choice Propane</u> License #: <u>LG20947</u> Phone #: <u>904-282-4324</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING ☐	Print Name <u>NA</u> Signature _____ Company Name: <u>NA</u> License #: <u>NA</u> Phone #: <u>NA</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SHEET METAL ☐	Print Name <u>NA</u> Signature _____ Company Name: <u>NA</u> License #: <u>NA</u> Phone #: <u>NA</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
FIRE SYSTEM/SPRINKLER ☐	Print Name <u>NA</u> Signature _____ Company Name: <u>NA</u> License #: <u>NA</u> Phone #: <u>NA</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SOLAR ☐	Print Name <u>NA</u> Signature _____ Company Name: <u>NA</u> License #: <u>NA</u> Phone #: <u>NA</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
STATE SPECIALTY ☐	Print Name <u>NA</u> Signature _____ Company Name: <u>NA</u> License #: <u>NA</u> Phone #: <u>NA</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE