

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1305-11

CONTRACTOR

ADAM PAPICA

PHONE

623.2383

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"/> ELECTRICAL 380	Print Name: Donald Davis License #: EC0002306	Signature: [Signature] Phone #: 386-623-0499
<input checked="" type="checkbox"/> MECHANICAL/ AC B 514	Print Name: DAVID HALL License #: CAC057424	Signature: [Signature] Phone #: 386-755-9792
<input checked="" type="checkbox"/> PLUMBING/ GAS 714	Print Name: Mark B. Barts License #: CFC057219	Signature: [Signature] Phone #: 752-8656
<input checked="" type="checkbox"/> ROOFING 514	Print Name: Adam Papica License #: FBC1253409	Signature: [Signature] Phone #: 752-4202
SHEET METAL	Print Name: NA License #: NA	Signature: [Signature] Phone #: [Signature]
FIRE SYSTEM/ SPRINKLER	Print Name: NA License #: NA	Signature: [Signature] Phone #: [Signature]
SOLAR	Print Name: NA License #: NA	Signature: [Signature] Phone #: [Signature]

Specialty License	License Number	Sub Contractor Printed Name	Sub Contractor Signature
<input checked="" type="checkbox"/> MASON	00157	FRANK CROFT	[Signature]
<input checked="" type="checkbox"/> CONCRETE FINISHER	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
<input checked="" type="checkbox"/> FRAMING 514	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
<input checked="" type="checkbox"/> INSULATION etc	000741	SUNCOAST Patsy Bowen	[Signature]
STUCCO	NA		
<input checked="" type="checkbox"/> DRYWALL	000838	Jerry Ruzicka (TERRACE)	[Signature]
<input checked="" type="checkbox"/> PLASTER	000838	Jerry Ruzicka (TERRACE)	[Signature]
<input checked="" type="checkbox"/> CABINET INSTALLER	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
<input checked="" type="checkbox"/> PAINTING	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
ACOUSTICAL CEILING	NA		
GLASS	NA		
CERAMIC TILE	See Separate Sheet Attached		
FLOOR COVERING	000118	JAMIN MARTIN	[Signature]
<input checked="" type="checkbox"/> ALUM/VINYL SIDING	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
<input checked="" type="checkbox"/> GARAGE DOOR	CBC1253409	ADAM'S FRAMING & CONST	[Signature]
METAL BLDG ERECTOR	NA		

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.