SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME _____

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.

		Need
ELECTRICAL ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Lic Liab W/C EX DE
MECHANICAL/ A/C ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Lic Liab W/C EX DE
PLUMBING/ GAS ☐ CC#_____	Print Name Kenneth Ault Signature _____ Company Name: Kenneth EDWARD Ault Plumbing inc. License #: CFC1429807 Phone #: 386-697-3856	Lic Liab W/C EX DE
ROOFING ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Lic Liab W/C EX DE
SHEET METAL ☐ CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #:_____	Lic Liab W/C EX DE
FIRE SYSTEM/ SPRINKLER ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License#: _____ Phone #:_____	Lic Liab W/C EX DE
SOLAR ☐ CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #: _____	Lic Liab W/C EX DE
STATE ☐ SPECIALTY CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #: _____	Lic Liab W/C EX DE

Ref: F.S. 440.103; ORD. 2016-30

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME _____

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.

			Need
ELECTRICAL ☐ CC# 811	Print Name RYAN BEVILLE	Signature	Lic / Liab / W/C / EX / DE
	Company Name: RBI ELECTRICAL Contracting		
	License #: EC13004236	Phone #: 386 339 0360	
MECHANICAL/ A/C ☐ CC# 1317	Print Name BRYAN BOUNDS	Signature	Lic / Liab / W/C / EX / DE
	Company Name: BOUNDS HEATING & COOLING		
	License #: CAC1815198	Phone #: 352-472-2761	
PLUMBING/ GAS ☐ CC# 623	Print Name MARK GANSKOP	Signature	Lic / Liab / W/C / EX / DE
	Company Name: EXPRESS PLUMBING		
	License #: CFC1428046	Phone #: 386-867-0269	
ROOFING ☐ CC# 1129	Print Name [redacted]	Signature	Lic / Liab / W/C / EX / DE
	Company Name: [redacted]		
	License #: [redacted]	Phone #:	
SHEET METAL ☐ CC#	Print Name	Signature	Lic / Liab / W/C / EX / DE
	Company Name:		
	License #:	Phone #:	
FIRE SYSTEM/ SPRINKLER ☐ CC#	Print Name	Signature	Lic / Liab / W/C / EX / DE
	Company Name:		
	License#:	Phone #:	
SOLAR ☐ CC#	Print Name	Signature	Lic / Liab / W/C / EX / DE
	Company Name:		
	License #:	Phone #:	
STATE SPECIALTY ☐ CC#	Print Name	Signature	Lic / Liab / W/C / EX / DE
	Company Name:		
	License #:	Phone #:	

Ref: F.S. 440.103; ORD. 2016-30

APPLICATION/PERMIT # _____ JOB NAME _____ 6

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.

		Need
ELECTRICAL =	Print Name _____ Signature _____	= Lic
	Company Name: _____	= Liab
CC# _____	License #: _____ Phone #: _____	= W/C = EX = DE
MECHANICAL/	Print Name Stephen Brisbois Signature	Need
A/C X =	Company Name: Epic A/C Service	= Lic = Liab = W/C = EX = DE
CC# _____	License #: CAC1819412 Phone #: 386-623-1609	
PLUMBING/	Print Name _____ Signature _____	Need
GAS =	Company Name: _____	= Lic = Liab = W/C = EX = DE
CC# _____	License #: _____ Phone #: _____	
ROOFING	Print Name _____ Signature _____	Need
=	Company Name: _____	= Lic = Liab = W/C = EX = DE
CC# _____	License #: _____ Phone #: _____	
SHEET METAL	Print Name _____ Signature _____	Need
=	Company Name: _____	= Lic = Liab = W/C = EX = DE
CC# _____	License #: _____ Phone #: _____	
FIRE SYSTEM/	Print Name _____ Signature _____	Need
SPRINKLER =	Company Name: _____	= Lic = Liab = W/C = EX = DE
CC# _____	License#: _____ Phone #: _____	
SOLAR	Print Name _____ Signature _____	Need
=	Company Name: _____	= Lic = Liab = W/C = EX = DE
CC# _____	License #: _____ Phone #: _____	
STATE =	Print Name _____ Signature _____	Need
SPECIALTY	Company Name: _____	= L = L = V = I = I
CC# _____	License #: _____ Phone #: _____	

Ref: F.S. 440.103; ORD. 2016-30

SUBCONTRACTOR VERIFICATION

65

APPLICATION/PERMIT # _____ JOB NAME _____

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 ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
MECHANICAL/ A/C ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/ GAS ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License #: _____ Phone #:_____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING ☐ CC#_____	Print Name Ralph Laverdure Signature [signature] Company Name: RWL Roofing LLC License #: CCC 1328590 Phone #: 386-623-0178	Need ☑ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SHEET METAL ☐ CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #:_____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
FIRE SYSTEM/ SPRINKLER ☐ CC#_____	Print Name_____ Signature_____ Company Name:_____ License#: _____ Phone #:_____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SOLAR ☐ CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
STATE SPECIALTY ☐ CC#_____	Print Name_____ Signature_____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE

Ref: F.S. 440.103; ORD. 2016-30