

Subcontractor Verification Form

APPLICATION/PERMIT # 52961

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 Contractor's 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.*

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

Printed Name: Carlos Arango Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: 934.290 0620

MECHANICAL / A/C

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____

PLUMBING / GAS

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____

ROOFING

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____

FIRE SYSTEM / SPRINKLER

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____

SOLAR

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____

STATE SPECIALTY

Printed Name: _____ Signature: _____
Company Name: _____ Owner
License #: _____ Phone #: _____



Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Change of Subcontractor Request

Permit Information

- Permit #: App 16389 52961
- Property Owner: Carlos Arango
- Job Site Address: 143 SW Meadowlands Dr.
Lake City FL 32024
- Original Subcontractor: _____
- License #: _____
- New Subcontractor: _____
- License #: _____

Trade (i.e. Electrical, Plumbing, HVAC, etc.): _____

FOR OFFICE USE			
DATE RECEIVED: _____			
<input type="radio"/>	APPROVED	<input type="radio"/>	DENIED
COMPLETED CHANGE: <input type="radio"/> YES			
DATE PROCESSED: _____			
PROCESSED BY: _____			
NOTES: _____			

Reason for Change:

is to Fart away

Required Documents:

- Subcontractor MUST be on file with our jurisdiction. If not, complete registration by making application @ <https://www.columbiacountyfla.com/PermitSearch/MyBNZPortalLogin.aspx>
- New signed Subcontractor Form

Hold Harmless Acknowledgement

The undersigned agree to hold harmless and indemnify Columbia County and its agents from any claims or liability resulting from this change of subcontractor.

Signatures (All must be notarized)

• Property Owner (If Owner-Builder)

Printed Name: Carlos Mangu Date: 10-17-2025.

Signature: 

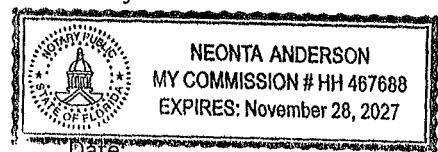
State: Florida County: Columbia

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this 17 day of Nov, 2025, by _____, who is

personally known to me or has provided the following identification: FL DL

Notary Printed Name: Neonta Anderson Notary Seal:

Notary Signature: 



• General Contractor

Printed Name: _____

Signature: _____

State: _____ County: _____

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this _____ day of _____, 20_____, by _____, who is
 personally known to me or has provided the following identification: _____

Notary Printed Name: _____

Notary Seal:

Notary Signature: _____



Published 10/2025