

# 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 #: 954.290 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 65389 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: _____
( ) APPROVED ( ) DENIED
COMPLETED CHANGE: ( ) YES
DATE PROCESSED: _____
PROCESSED BY: _____
NOTES: _____

### Reason for Change:

<u>is to fart away</u>
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### 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 Arango Date: 10-17/2025

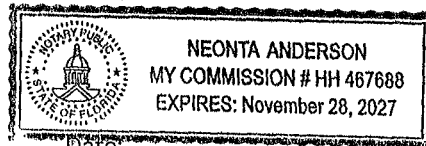
Signature: [Signature]

State: Florida County: Columbia

The foregoing instrument was acknowledged before me, by means of (X) 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: [Signature]



- General Contractor**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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: \_\_\_\_\_



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