SUBCONTRACTOR VERIFICATION

| APPLICATION/PERMIT # | JOB NAME |
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| | |

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 <u>REQUIRED</u> 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 NameSignature | | <u>Need</u> □ Lic |
|--------------|--------------------------------------|---|-------------------|
| | Company Name: | | □ Liab □ W/C |
| CC# | License #: Phone #: | | □ EX |
| | | 1 1 1 | □ DE Need |
| MECHANICAL/ | Print Name Michae Faught Signature N | achiel fought | □ Lic |
| A/C | Company Name: Athers Heat 3 Art Inc | V | □ Liab □ W/C |
| CC# | License #: CAC1813540 Phone #: 356 | | □ EX □ DE |
| PLUMBING/ | Print Name Signature | | <u>Need</u> □ Lic |
| GAS | Company Name: | | □ Liab □ W/C |
| CC# | License #: Phone #: | | □ EX □ DE |
| ROOFING | Print NameSignature | | Need □ Lic |
| | Company Name: | | □ Liab |
| CC# | License #: Phone #: | | □ EX □ DE |
| SHEET METAL | Print Name Signature | | Need Lic |
| | Company Name: | | □ Liab □ W/C |
| CC# | License #: Phone #: | | □ EX □ DE |
| FIRE SYSTEM/ | Print NameSignature | | Need □ Lic |
| SPRINKLER | Company Name: | | □ Liab □ W/C |
| CC# | License#:Phone #: | | □ EX □ DE |
| SOLAR | Print NameSignature | | Need E Lic |
| | Company Name: | | □ Liab □ W/C |
| CC# | License #: Phone #: | | □ EX □ DE |
| STATE | | * | Need |
| SPECIALTY | Print NameSignature | | □ Liab □ W/C |
| SPECIALIT | Company Name: | , | □ EX |
| CC# | License #: Phone #: | 1 | □ DE |

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| ELECTRICAL | Print Name Signature | Need Lic |
| | Company Name: | □ Liab □ W/C |
| CC# | License #: Phone #: | □ EX □ DE |
| MECHANICAL/ | Print Name Signature | <u>Need</u> □ Lic |
| A/C | Company Name: | □ Liab □ W/C |
| CC# | License #: Phone #: | □ EX |
| PLUMBING/ | Print Name Cody Boxes Signature Signature | Need |
| GAS 🗸 | Company Name: Barrs Ylumbing, INC. | □ Liab □ W/C |
| CC# | License #: <u>CFC 1427145</u> Phone #: <u>(386)</u> 623-0509 | □ EX □ DE |
| ROOFING | Print NameSignature | Need Lic |
| | Company Name: | □ Llab |
| CC# | | □ W/c |
| | License #:Phone #: | D DE Need |
| SHEET METAL | Print NameSignature | □ Lic □ Liab |
| Ш | Company Name: | □ W/C |
| CC# | License #: Phone #: | □ DE Need |
| FIRE SYSTEM/ | Print Name Signature | □ Lic □ Liab |
| SPRINKLER | Company Name: | . □ w/c |
| CC# | License#: Phone #: | □ EX |
| SOLAR | Print NameSignature | Need □ Lic |
| | Company Name: | □ Liab □ W/C |
| CC# | License #: Phone #: | □ EX □ DE |
| STATE | Print Name Signature | Need □ Lic |
| SPECIALTY | | □ Liab □ W/C |
| CC# | Company Name: License #: Phone #: | □ EX |
| CC# | License #: Phone #: | □ DE |

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| ELECTRICAL | Print Name Mervin L Hines Signature her Hills | <u>Need</u> □ Lic □ Liab | |
|--------------|---|--------------------------|--|
| V | Hines Electrical & Communication, Inc. | | |
| | | □ W/C | |
| CC# | License #: EC13003393 Phone #: 352-472-4277 | □ DE | |
| MECHANICAL/ | Print Name Signature | Need | |
| A/C | Company Name: | □ Liab | |
| | | □ W/C | |
| CC# | License #: Phone #: | □ DE | |
| PLUMBING/ | Print Name Signature | <u>Need</u> □ Lic | |
| GAS | Company Name: | □ Liab □ W/C | |
| | | □ W/C | |
| CC# | License #: Phone #: | □ DE | |
| ROOFING | Print NameSignature | <u>Need</u> | |
| | | □ Lic □ Liab | |
| | Company Name: | □ w/c | |
| CC# | License #:Phone #: | □ EX □ DE | |
| SHEET METAL | Print NameSignature | DE Need | |
| | Company Name: | □ Liab | |
| | | □ W/C □ EX | |
| CC# | License #: Phone #: | □ DE | |
| FIRE SYSTEM/ | Print NameSignature | <u>Need</u> □ Lic | |
| SPRINKLER | Company Name: | □ Llab | |
| CC# | License#: Phone #: | □ EX | |
| SOLAR | | Need | |
| SOLAR | Print NameSignature | □ Lic □ Liab | |
| | Company Name: | □ w/c | |
| CC# | License #:Phone #: | □ EX | |
| | | Need | |
| STATE | Print NameSignature | □ Lic □ Liab | |
| SPECIALTY | Company Name: | ☐ Liab ☐ W/C | |
| CC# | License #:Phone #: | □ EX | |
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Ref: F.S. 440.103; ORD. 2016-30