

# 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 <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.

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ELECTRICAL	Print NameSignature		□ Lic
	Company Name:	4	□ Liab
		T	□ EX
CC#	License #:Phone #		□ DE
MECHANICAL/	Print Name Mark Lone Frank Signatur	e Just	Need
	-		☐ Liab
A/C	Company Name: Franks + LANE Hear	ing and Air LLC	□ w/c
CC#	License #: CAC/8/863/ Phone #	:386-466-7514	□ EX □ DE
DILIA DINIC /			Need
PLUMBING/	Print Name Signatur	e	□ Uc
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Ref: F.S. 440.103; ORD. 2016-30

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APPLICATION/PERMIT #	JO	NAME

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ELECTRICAL	Print NameSignature	Need
	Company Name:	□ Liab □ W/C
CC#	License #: Phone #:	□ EX
		Need Need
MECHANICAL/	Print Name Signature	_ C Lic
A/C	Company Name:	□ Liab □ W/C
CC#	License #: Phone #:	□ EX
PLUMBING/	Print Name DAY MOSSONG Signature Double	Need
GAS	Company Name: LUC OAK Plymbilly	□ Liab
	License #: CFC (427438 Phone #(386) 362'1767	□ W/C
CC#	License #: Phone #	- DE
ROOFING	Print NameSignature	Need Lic
	Company Name:	□ Liab
		□ W/C □ EX
CC#	License #: Phone #:	□ DE
SHEET METAL	Print NameSignature	Need
	Company Name:	□ Liab
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CC#	License #: Phone #:	□ DE
FIRE SYSTEM/	Print NameSignature	Need Lic
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SOLAR	Print Name Signature	□ Lic
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STATE	Print NameSignature	☐ Lic
SPECIALTY	Company Name:	E W/c
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# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT#	JOB NAME	48505
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ELECTRICAL	Print Name Marcus Matth	ews Signature Mull	Need Z uk
V	Company Name: Matthews Electric LLC		I Liab
CC#		Phone #: 386-344-2029	Z EX
MECHANICAL/	Print Name		Need Lk
A/C	Company Name:		I Liab
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PLUMBING/	Print Name		Need Tuc
GAS	Company Name:		□ uab □ w/c
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CC#	License # CRC 132944	L Phone # 386 - 755 - 1411	I EX
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