

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME _____

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

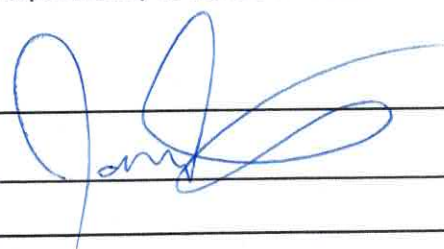
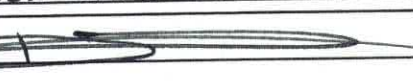
Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

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.

ELECTRICAL ☐ CC# _____	Print Name <u>JAMES F QUINN III</u> Signature  Company Name: <u>CRAFT ELECTRIC INC</u> License #: <u>EC13010994</u> Phone #: <u>352-378-9274</u>	Need ☒ Lic ☒ Liab ☒ W/C ☐ EX ☐ DE
MECHANICAL/A/C ☐ CC# _____	Print Name <u>DREW THOMAS WORTHMANN</u> Signature  Company Name: <u>Happy Home Construction LLC</u> License #: <u>CMC 1250473</u> Phone #: <u>352-664-2779</u>	Need ☒ Lic ☒ Liab ☒ W/C ☐ EX ☐ DE
PLUMBING/GAS ☐ CC# _____	Print Name <u>DREW THOMAS WORTHMANN</u> Signature  Company Name: <u>Happy Home Construction LLC</u> License #: <u>CFC 1429369</u> Phone #: <u>352-664-2779</u>	Need ☒ Lic ☒ Liab ☒ W/C ☐ EX ☐ DE
ROOFING ☐ CC# _____	Print Name <u>DREW THOMAS WORTHMANN</u> Signature  Company Name: <u>HAPPY HOME CONSTRUCTION LLC</u> License #: <u>CCC 1334454</u> Phone #: <u>352-664-2779</u>	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