### **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.

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ELECTRICAL	Print NameSign	ature	= Lic
·	Company Name:		_ Uab
<u> </u>			I w/c
CC#	License #: Pho		I DE
MECHANICAL/		ature Contra Silvisor	Need C Lic
A/C	Company Name: Wilson Heat & Air, Inc.		I Liab I W/C
CC#		ne #:_386-496-9000	I EX
PLUMBING/	Print Name Sign		Need Lic
GAS	Company Name:		I Liab
		H.	□ W/C □ EX □ DE
CC#	License #:Pho	ne #:	
ROOFING	Print NameSign	ature	Need Lic
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FIRE SYSTEM/	Print NameSign		Need Lic
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### SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #	<b>#</b>	JOB NAME	<i>س</i> ر	
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<del></del>		<del></del>
ELECTRICAL	Print Name DAV Wood Signature CW.	<u>Need</u> □ Lic
	Company Name: Wood's Electric	□ Liab
		□ w/c □ EX
CC#	License #: EC-1300 2213 Phone #: 3 \$6-623-1132	□ EX □ DE
MECHANICAL/	Print Name Signature	Need
<u> </u>		□ Lic
A/C	Company Name:	□ Liab □ W/C
CC#	License #: Phone #:	□ EX
9011	Thomas .	□ DE
PLUMBING/	Print Name Signature	Need D Lic
GAS	Company Name:	☐ Liab
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CC#	License #: Phone #:	□ EX □ DE
ROOFING	Print NameSignature	Need
KOOFING	SignatureSignature	□ Lic
,	Company Name:	□ Liab □ W/C
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SPECIALTY	Company Name:	□ Liab □ W/C
SPECIALTY  CC#		□ Liab

Ref: F.S. 440.103; ORD. 2016-30

### SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #	JOB NAME	
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ELECTRICAL	Print NameSignature	Need
	Company Name:	☐ Liab
		□ EX
CC#	License #: Phone #:	□ DE
MECHANICAL/	Print Name Signature	<u>Need</u> □ Lic
A/C	Company Name:	☐ Liab ☐ W/C
CC#	·	□ EX
		☐ DE
PLUMBING/	Print Name Mark Dawson Signature Mall	<u>Need</u> Lic
GAS	Company Name: Paradise Plumbing Services LLC	□ Llab □ W/C
CC#	License #: <u>CFC · 142 7245</u> Phone #: <u>386 · 288 - 6407</u>	□ EX □ DE
ROOFING	Print NameSignature	Need
		□ Lic □ Liab
	Company Name:	□ w/c
CC#	License #: Phone #:	□ EX □ DE
SHEET METAL	Print Name Signature	Need
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CC#	License#: Phone #:	□ DE
SOLAR	Print NameSignature	<u>Need</u> □ Lic
	Company Name:	□ Liab □ W/C
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