SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #

48733

OBNAME 5+5# 327 - CLOSET ENCLOSINGE

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	Print Name DAND Wood Signature DOW.	<u>Need</u> □ Lic
V	Company Name: Wood's Electric	□ Uab □ W/C
CC#	License #: EC-1300 2213 Phone #: 386-623-1132	□ EX
MECHANICAL/	Print Name Signature	Need DE
A/C	Company Name:	□ Llab
CC#	License #: Phone #:	□ W/C □ EX □ DE
PLUMBING/	Print Name Signature	Need
GAS	Company Name:	□ Lic □ Liab
CC#	License #: Phone #:	□ W/C
ROOFING	Print NameSignature	□ DE Need
	Company Name:	□ Lic □ Liab
CC#	License #:Phone #:	□ W/C
SHEET METAL	Print Name Signature	□ DE Need
	Company Name:	□ Lic □ Lab
CC#	License #: Phone #:	D W/C
FIRE SYSTEM/	Print NameSignature	Need Dic
SPRINKLER	Company Name:	□ Llab
CC#	License#: Phone #:	□ W/C □ EX □ DE
SOLAR	Print Name Signature	Need
	Company Name:	□ Lic □ Liab
CC#	License #: Phone #:	□ W/C
STATE		Need
	Print Name Signature	□ Lic □ Liab
SPECIALTY	Company Name:	□ w/c □ Ex
CC#	License #: Phone #:	. DE

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 48733

JOB NAME StS # 327 - CLOSET ENCLOSURE

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E1 E 6 E 1 E 1		Need
ELECTRICAL	Print NameSignature	□ Lic □ Liab
	Company Name:	= W/c
CC#	License #: Phone #:	= EX = DE
MECHANICAL/	Print Name Clinton G. Wilson Signature Clinton Signature	Need
A/C	Company Name: Wilson Heat & Air, Inc.	I Liab
CC#	License #: CAC057886 Phone #: 386-496-9000	I W/C I EX I DE
PLUMBING/	Print Name Signature	Need I Lic
GAS	Company Name:	I Uab
CC#	License #:Phone #:	I EX
ROOFING	Print NameSignature	Need = Uc
	Company Name:	I Liab
CC#	License #: Phone #:	I EX
SHEET METAL	Print NameSignature	Need Lic
	Company Name:	I Liab
CC#	License #: Phone #:	I EX
FIRE SYSTEM/	Print NameSignature	Need Lic
SPRINKLER	Company Name:	I Liab I W/C
CC#	License#: Phone #:	I EX
SOLAR	Print Name Signature	Need I Uc
	Company Name:	I Liab I W/C
CC#	License #: Phone #:	I EX
STATE	Print NameSignature	Need - Lic
SPECIALTY	Company Name:	I Liab
CC#	License #: Phone #:	I EX