MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	BER	CONTRACTOR	PHONE
	THIS FORM	MUST BE SUBMITTED PRIOR TO THE ISSUA	NCE OF A PERMIT
records of the s	ubcontractors who actual a contractor shall requi	er all trades doing work at the perm sily did the trade specific work unde re all subcontractors to provide evic and a valid Certificate of Competency	itted site. It is <u>REOUIRED</u> that we have or the permit. Per Florida Statute 440 and dence of workers' compensation or delicense in Columbia County.
Any changes, t start of that su	he permitted contractor bcontractor beginning a	is responsible for the corrected for ny work. Violations will result in st	m being submitted to this office prior to the op work orders and/or fines.
ELECTRICAL	Print Name	Signatu	re
	License #:		*
	Company Name:	Qualifie	Form Attached
MECHANICAL/	Print Name Mich	ael Boland Signat	ire Miche Bola
A/C	License #: CACIBI	7716 Phone	#: 352 274.9326
-	Company Name: ACE	MC of Ocala	fier Form Attached
<u>La</u>			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.