

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME _____

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

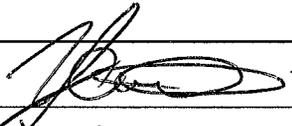
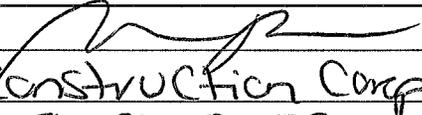
Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

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.

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| ELECTRICAL <input checked="" type="checkbox"/> | Print Name <u>Yoedan Carrera zana</u> Signature  Company Name: <u>Best Lighting Electric</u> License #: <u>EC13007882</u> Phone #: <u>561-566-3213</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| MECHANICAL/ A/C <input checked="" type="checkbox"/> | Print Name <u>Albert Heai</u> Signature  Company Name: <u>ALL 4 Construction Corp</u> License #: <u>CMC1249873</u> Phone #: <u>561-662-2665</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| PLUMBING/ GAS <input checked="" type="checkbox"/> | Print Name <u>Albert Heai</u> Signature  Company Name: <u>ALL 4 Construction Corp</u> License #: <u>CFC1428037</u> Phone #: <u>561-662-2665</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| ROOFING <input checked="" type="checkbox"/> | Print Name <u>MADAY L Diaz</u> Signature  Company Name: <u>Diaz Homes Construction Corp</u> License #: <u>CRCL332651</u> Phone #: <u>561-317-8752</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| SHEET METAL <input type="checkbox"/> | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| FIRE SYSTEM/ SPRINKLER <input type="checkbox"/> | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| SOLAR <input type="checkbox"/> | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| STATE SPECIALTY <input type="checkbox"/> | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |