

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1404-09 CONTRACTOR Bryan Zecher PHONE 386\*752\*8653**RE: HUTCHISON**

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

**Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines**

✓ <b>ELECTRICAL</b> 76	Print Name <u>Matthews Electric, LLC</u> License #: <u>EC 13005459</u>	Signature <u>[Signature]</u> Phone #: <u>386-344-2029</u>
✓ <b>MECHANICAL/A/C</b> 747	Print Name <u>Mark Touchstone</u> License #: <u>CACO-58099</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-0625</u>
✓ <b>PLUMBING/GAS</b> 1081	Print Name <u>Wolfe Plumbing</u> License #: <u>CFC 051621</u>	Signature <u>[Signature]</u> Phone #: <u>386-935-0616</u>
✓ <b>ROOFING</b> 187	Print Name <u>MacJohnson Roofing</u> License #: <u>RC 0061384</u>	Signature <u>[Signature]</u> Phone #: <u>352-472-4943</u>
<b>SHEET METAL</b>	Print Name <u>N/A</u> License #:	Signature _____ Phone #:
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name <u>N/A</u> License#:	Signature _____ Phone #:
<b>SOLAR</b>	Print Name <u>N/A</u> License #:	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<b>MASON</b>		<u>N/A</u>	
✓ <b>CONCRETE FINISHER</b>	<u>00063</u>	<u>Darryl Spradley</u>	<u>[Signature]</u>
✓ <b>FRAMING</b>	<u>001141</u>	<u>Jeff Nichols</u>	<u>[Signature]</u>
✓ <b>INSULATION</b>	<u>000240</u>	<u>Will Sikes</u>	<u>[Signature]</u>
<b>STUCCO</b>		<u>N/A</u>	
✓ <b>DRYWALL</b>	<u>001197</u>	<u>Valerie Massie</u>	<u>Valerie Massie</u>
<b>PLASTER</b>		<u>N/A</u>	
✓ <b>CABINET INSTALLER</b>	<u>CBC 054575</u>	<u>Bryan Zecher</u>	<u>[Signature]</u>
✓ <b>PAINTING</b>	<u>000330</u>	<u>Bobby Touchton</u>	<u>[Signature]</u>
<b>ACOUSTICAL CEILING</b>		<u>N/A</u>	
<b>GLASS</b>		<u>N/A</u>	
<b>CERAMIC TILE</b>		<u>N/A</u>	
✓ <b>FLOOR COVERING</b>	<u>CBC 054575</u>	<u>Bryan Zecher</u>	<u>[Signature]</u>
✓ <b>ALUM/VINYL SIDING</b>	<u>CBC 054575</u>	<u>Bryan Zecher</u>	<u>[Signature]</u>
<b>GARAGE DOOR</b>		<u>N/A</u>	
<b>METAL BLDG ERECTOR</b>		<u>N/A</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.

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1404-09/Permit 31889 CONTRACTOR Bryan Zecher Construction PHONE**HUTCHISON**

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 318.06, a contractor shall require all subcontractors to provide evidence of workers' compensation exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

*Any changes, the permitted contractor is responsible for the corrected form being submitted to this start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.*

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
MECHANICAL/ A/C _____	Print Name _____ License # _____	Signature _____ Phone # _____
PLUMBING/ GAS	Print Name _____ License # _____	Signature _____ Phone # _____
ROOFING	Print Name _____ License # _____	Signature _____ Phone # _____
SHEET METAL	Print Name _____ License # _____	Signature _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License # _____	Signature _____ Phone # _____
SOLAR	Print Name _____ License # _____	Signature _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractor
MASON			
CONCRETE FINISHER			
FRAMING	000035	DAVID PONTON	
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

**F. S. 440.103 Building permits; identification of minimum premium policy.**- Every employer shall, as 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 in compliance the time the employer applies for a building permit

5.15.1A

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 31889 CONTRACTOR Bryan Zecher PHONE 386 752 8653  
 Permit # 31889 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

5.30.14

ELECTRICAL	Print Name _____ License # _____	Signature _____ Phone # _____
MECHANICAL/ WC 1460	Print Name <u>DAVID L. COLEMAN</u> License # <u>C021815522 Custom Comfort Heating &amp; Air, Inc. 904-219-4404</u>	Signature <u>David L. Coleman</u> Phone # _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone # _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone # _____
SOLAR	Print Name _____ License # _____	Signature _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Contractor Form 1 Subcontractor Form 1/08