

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1403-07 CONTRACTOR Glenn Williams Jr PHONE 386-344-3669

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.*

✓ ELECTRICAL	Print Name <u>Hardrick McGuire</u> License #:	Signature <u>Hardrick Mc Guire</u> Phone #: <u>386-752-2681</u>
✓ MECHANICAL/ A/C	Print Name <u>Hardrick McGuire</u> License #:	Signature <u>Hardrick Mc Guire</u> Phone #: <u>386-752-2681</u>
✓ PLUMBING/ GAS	Print Name <u>Hardrick McGuire</u> License #:	Signature <u>Hardrick Mc Guire</u> Phone #: <u>386-752-2681</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

**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.

License Number IH / 1054858 / 1 Name: GLENN M WILLIAMS JR

Order # 1466 Label # 21080

Manufacturer

Homeowner *Hardist Mcguire*

Year Model: *1990*

Address:

Length & Width.

*14 X 56*

City/State/Zip, *Lake City FL*

Type Longitudinal System.

Phone #

Type Lateral Arm System.

*Luv*

Date Installed.

New Home: ☒ Used Home: ☒

Installed Wind Zone:

Data Plate Wind Zone:

Note:

(Check Size of Home)

Single ☒

Double ☐

Triple ☐

HUD Label #:

Soil Bearing / PSF:

Torque Probe / in-lbs:

Permit #:

# STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

21080

LABEL #

DATE OF INSTALLATION

GLENN M WILLIAMS JR

NAME

IH / 1054858 / 1

1466

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS  
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325  
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

## INSTRUCTIONS

PLEASE WRITE DATE OF  
INSTALLATION AND AFFIX  
LABEL NEXT TO HUD LABEL.  
USE PERMANENT INK PEN  
OR MARKER ONLY.  
COMPLETE INFORMATION  
ABOVE AND KEEP ON FILE  
FOR A MINIMUM OF 2 YEARS.  
YOU ARE REQUIRED TO  
PROVIDE COPIES WHEN  
REQUESTED.