SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _	1209-14	CONTRACTOR AA MON	NICKEISM	PHONE 487.1240

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.

Signature

Signature

Phone #:

ELECTRICAL

MECHANICAL/

PLUMBING/

A/C

License #:

Print Name

License #:

Print Name

time the employer applies for a building permit.

PLUMBING/ GAS	Print Name License #:	9		SignaturePhone	#:	
ROOFING	Print NameLicense #:			2005-107-107		
SHEET METAL	Print NameLicense #:					
FIRE SYSTEM/ SPRINKLER	Print NameLicense#:			SignaturePhone #:		
SOLAR	Print NameLicense #:		7	SignaturePhone #:		
Specialty L	icense	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature	
MASON						
CONCRETE FIN	NISHER					
FRAMING						
INSULATION						
STUCCO						
DRYWALL						
PLASTER						
CABINET INST	ALLER			2501-0		
PAINTING						
ACOUSTICAL (CEILING		99			
GLASS						
CERAMIC TILE						
FLOOR COVER	IING					
ALUM/VINYL S	SIDING					
GARAGE DOO	R		14			
METAL BLDG						

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

Contractor Forms: Subcontractor form: 6/09

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ELECTRICAL	Print Name License #:	NA		Signature Phon	ne #:
MECHANICAL/	Print Name	Kyndin Ra	shelt	Signature	
A/C	License #:			Phon	e #:
PLUMBING/	Print Name	MA	_	Signature	
GAS	License #:	()'	1	Phon	ne #:
ROOFING	Print Name	Acron Ma	cc Home	Signature	las las
	License #:	CBC 125	8040	Phon	ne #:
SHEET METAL	Print Name			Signature	
	License #:	NA		Phon	ne #:
FIRE SYSTEM/	Print Name		1.	Signature	
SPRINKLER	License#:	N	1A	Phon	e #:
SOLAR	Print Name	1.	1.	Signature	
	License #:	N	IA	Phon	ne #:
Specialty Li	cense	License Number	Sub-Contra	ctors Printed Name	Sub-Contractors Signature
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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 Forms: Subcontractor form: 6/09