		51	BCONTRA	CTOR VERIFICAT	TION FORM		
APPLICATION NUM	BER 13	10 - 3 7 THIS FORM MUST	CONTI	ACTOR 10	THE ISSUANCE OF A	PERMIT FAC 386-752-2414 PERMIT FAC 386-438-815	
records of the s Ordinance 89-6	ubcontracto , a contracti	ors who actually di or shall require all	d the trac subcontra	le specific wi actors to pro	ork under the per vide evidence of	. It is REQUIRED that we have smit. Per Florida Statute 440 and workers' compensation or n Columbia County.	
						submitted to this office prior to the orders and/or fines.	
ELECTRICAL	Print Name License #:				Signature Phone #:		
MECHANICAL/ A/C	Print NameLicense #:				SignaturePhone M:		
PLUMBING/ GAS	Print Name				SignaturePhone #:		
ROOFING	Print NameLicense #:				SignaturePhone #:		
SHEET METAL	Print NameLicense #:				SignaturePhone #:		
FIRE SYSTEM/ SPRINKLER	Print NameLicense#.				Signature Phone #:		
SOLAR	Print Name License #:	ne Name			Signature Phone #:		
Specialty t	icense	George Number	Sub	·Contractors (kinted Name	Sub-Contractors Signature	
MASON						01	
CONCRETE FINISHER		1061	NIF	iElds		Al Fields	
FRAMING					The state of the s		
INSULATION							
STUCCO							
DRYWALL						- American de la company de la	
PLASTER							
CABINET INSTALLER							
PAINTING							
ACOUSTICAL CEILING			_				
GLASS			1	-			
CERAMIC TILE			_				
FLOOR COVERING			ļ				
ALUM/VINYL SIDING GARAGE DOOR			 				
METAL BLDG ERECTOR			-	4.10.00	4.67.5.5	1000	
amppen me by the contract of t		(GC152083				1 4/6/	
					- ·	y 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.

Fax to Building Dept. 386-758-2160

604 226-0334 p. 1 Nc. 8155 P. 2

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