

SUBCONTRACTOR VERIFICATION

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Hamilton County makes every effort to produce the most accurate information possible. No

Contact Us

Developed by

APPLICATION/PERMIT

assessments, expressed or implied, are provided for the data herein, its use or interpretation. The assessment information is from the last certified taxroll. All data JOB NAME change before the next certified taxroll.

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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.

* ELECTRICAL <input checked="" type="checkbox"/>	Print Name <u>Dennis Conklin</u>	Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: <u>D & S Lighting & Electric</u>		
CC# _____	License #: <u>13003800</u>	Phone #: <u>386-623-9055</u>	
MECHANICAL/ A/C <input checked="" type="checkbox"/>	Print Name <u>D.L. Williams</u>	Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: <u>D L Williams Heating & Cooling, LLC</u>		
CC# _____	License #: <u>CAC 1816913</u>	Phone #: <u>386-754-1987</u>	
PLUMBING/ GAS <input checked="" type="checkbox"/>	Print Name <u>Ken Roche</u>	Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: <u>Ken Roche Plumbing Now</u>		
CC# _____	License #: <u>CFC 1426527</u>	Phone #: <u>386-755-9243</u>	
ROOFING <input checked="" type="checkbox"/>	Print Name <u>Trent Giebeig</u>	Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: <u>Trent Giebeig Construction, Inc.</u>		
CC# _____	License #: <u>CRC 1330693</u>	Phone #: <u>386-397-0545</u>	
SHEET METAL <input type="checkbox"/>	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
CC# _____	License #: _____	Phone #: _____	
FIRE SYSTEM/ SPRINKLER <input type="checkbox"/>	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
CC# _____	License #: _____	Phone #: _____	
SOLAR <input type="checkbox"/>	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
CC# _____	License #: _____	Phone #: _____	
STATE SPECIALTY <input type="checkbox"/>	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
CC# _____	License #: _____	Phone #: _____	