## SUBCONTRACTOR VERIFICATION

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*	JOB NAME 234	Sw Cherry	Blassom	way
APPLICATION/PERMIT#	JOB NAIVIE			
			m and 1970.	

## 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.

iolations will	Print Name MARCUS MATTHEWS Signature MARCUS MATTHEWS Signature	Need □ Lic □ Lic
LECTRICAL	MATTHEWS ELECTRIC	
	Company Name:	DE
/ECHANICAL/	ROBERT JARVIS Signature	Need  U Uc  U Uab  U W/C
x/c	Company Name: JARVIS HEAT & AIR  License #: 001313 Phone #:	DE EX
PLUMBING/	Print Name CODY BARRS Signature Signature Company Name: BARRS PLUMBING	Need  Lic Lic Liab W/C
GAS	Company Name:   D7   11   12   12   13   14   15   15   15   15   15   15   15	DE Need
ROOFING	Print NameSignature  Company Name:	□ Uc □ Uab □ w/c
CC#	License #:Phone #:	D EX DE Need
SHEET METAL	Print NameSignature	☐ Lic ☐ Liab ☐ W/C
CC#	Company Name:Phone #:	☐ EX ☐ DE Need
FIRE SYSTEM/	Print NameSignature	□ Lic □ Liab □ W/C
SPRINKLER	Company Name:Phone #:	G EX G DE
SOLAR	Print NameSignature	I Lieb
CC#	Company Name: Phone #:	□ EX □ DE
STATE	Print NameSignature	Need C Usb
SPECIALTY CC#	Company Name:Phone #:	I EX

#### SUBCONTRACION VERIFICATION

PPLICATION/PERMIT #	108 NAME 234	SW	Cherry	Blossom	way
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Violations will result in stop work orders and/or fines.

CH	Print Name MARCUS MATTHEWS  Company Name: MARK MATTHEWS E  Ucense #: 000076	_Signature LECTRIC	□ Uab □ W/c
	Company Name:	CONTRACTOR OF THE PROPERTY OF	-1
	Ucense #:	Phone #:	C EX D DE Need
MECHANICAL/	Prior Name ROBERT JARVIS	Signature	C Lic
vc	Company Name: JARVIS HEAT & AIR	200 20 11572	⊒ g w/c
C#		Phone #: 352 316-4513	— □ DE Need
PLUMBING/		Signature	I Us
GAS	Company Name: BARRS PLUMBING		0 w/c
CC#	License #: 000715	Phone #:	- D DE
ROOFING	FIMIL PIGNIC	Signature	_ C Uc
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SPECIALTY CC#	Company Name:	Phone #:	_ 0 w/c

## SUBCONTRACTOR VERIFICATION

PPLICATION/PERMIT #	JOB NAME 234	Sw	Cherry	Blossom	way

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LECTRICAL	Print Name MARCUS MATTHEWS Signature		
	Company Name: MARK MATTHEWS ELECTRIC	D W/C	
	License #: 000076 Phone #:	DE	
C#	PORFRT JARVIS Signature	Need Lic	
TECHANICAL/	Company Name: JARVIS HEAT & AIR	□ Liab □ W/C	
/c	Company Name: SARVIO TIE/TI CA AUTO	□ EX	
C#	License #: 001313 Phone #:	DE Need	
LUMBING/	Brint Name CODY BARRS Signature	□ Lic	
	Company Name: BARRS PLUMBING	□ Uab □ W/C	
GAS	License #: 000715 C TC 1427145 Phone #:		
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CC#	License #:Phone #:		

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APPLICATION/PERMIT#	JOB NAME 234 S	an cherry	Blosson	way	
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ELECTRICAL	Print Name	Signature	<u>Need</u> ☐ Lic
	Company Name:		□ Liab
CC#	License #:		□ EX □ DE
MECHANICAL/		Signature	Need D Lic
A/C	Company Name:		□ Liab
CC#	License #:		□ W/C □ EX □ DE
PLUMBING/		Signature	Need
GAS	Company Name:		□ Llab
CC#	License #:	Phone #:	□ W/C □ EX □ DE
ROOFING	Print Name Benjamin Kell	CV Signature	Need
	Company Name: KEELER ROOF	ING	□ Liab
CC#	License #: CCC1330509	Phone #(352)514-493	D EX
SHEET METAL	Print Name	Signature	Need
	Company Name:		□ Lieb
CC#	License #:		□ W/C □ EX □ DE
FIRE SYSTEM/		Signature	Need
SPRINKLER	Company Name:		□ Liab
CC#	License#:		□ w/c
SOLAR		Signature	DE Need
	Company Name:		□ Liab
CC#	License #:		□ EX
STATE		Signature	Need
SPECIALTY	Company Name:		□ Liab □ W/C
CC#	License #:	Phone #:	0 EX

Ref: F.S. 440.103; ORD. 2016-30