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#### SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1203-37	CONTRACTOR	Woods	ELECTRIAL	S CRUICE PHONE
				UANCE OF A PERMIT	

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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.

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,00	VELECTRICAL 765		DAVIE P. W.	lord :			· Wr2 386.364	-5246	
ola	MECHANICAL/ A/C A 487	Print Name_ License #:		/	Signature_				-
ol	PLUMBING/	Print Name_ License #:	V	/	Signature_	Phone #:	,		-
de	ROOFING 1266	Print Name_ License #:	1/	/	Signature_	Phone #:			-
ol	SHEET IMETAL	Print Name_ License #:	1/	/	Signature_	Phone #:		per exercise de la companya de la co	-
Ů.	FIRE SYSTEM/ SPRINKLER	Print Name_ License#:	NIA		Signature_	Phone #:			-
	SOLAR	Print Name_ License #:	NI	A	Signature_	Phone #:			
	Specialty Li	cense	License Number	Sub-Contractors P	rinted Name		Sub-Contr	actors Signature	
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	CONCRETE FIN	ISHER		Todd Gra				1	
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	INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL C GLASS CERAMIC TILE	ALLER EILING	1265 NIA 1265 1265 1265 1265	Todd Gra Seperate Todd ( Seperate Todd Seperate Todd Todd (	Shee Sray Shee Gray Gray Sheet Gray Sheet	<i>A</i>			
	INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO GLASS CERAMIC TILE FLOOR COVER	ALLER EILING ING SIDING	1265 NIA 1265 1265 1265 1265 1265	Todd Gra Seperate Todd ( Seperate Todd Todd Seperate Todd	Shee Sray Shee Gray Gray Sheet Gray Sheet	<i>A</i>			

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 \_\_\_

APPLICATION NUMBER

		THIS FORM MUS	T BE SUBMITTED PRIOF	TO THE ISSUANCE OF	A PERMIT	
records of the s Ordinance 89-6	ubcontract , a contract	ors who actually of or shall require al	did the trade specifi I subcontractors to	c work under the p provide evidence o	ite. It is <u>REQUIRED</u> that we have permit. Per Florida Statute 440 and of workers' compensation or ie in Columbia County.	
					g submitted to this office prior to the rk orders and/or fines.	
ELECTRICAL	Print Name	/		Signature		
	License #:				ne#: 120000	
MECHANICAL/	Print Name License #:	CACOSI	Jones Inc	SignaturePhor	196-752-5389 ne#: 386-752-5389	
PLUMBING/	Print Name			Signature		
GAS	License #:			Pho	ne #:	
ROOFING	Print Name		A. I. A. M. A. S.	Signature		
	License #:			Pho	ne #:	
SHEET METAL	Print Name			Signature		
	License #:			Pho	ne #:	
FIRE SYSTEM/	Print Name			Signature		
SPRINKLER	License#:			Phone #:		
SOLAR	Print Name		*	Signature		
	License #:			Pho	ne#:	
Specialty Lie	cense	License Number	Sub-Contractor	s Printed Name	Sub-Contractors Signature	
MASON						
CONCRETE FIN	ISHER		71		-0.	
FRAMING		750		ALCOHOL IN COLUMN TO THE COLUM		
INSULATION						
STUCCO			·····			
DRYWALL						
PLASTER						
CABINET INSTA	LLER		-			
PAINTING						
ACOUSTICAL C	EILING					
GLASS				*******		
CERAMIC TILE						
FLOOR COVERI						
ALUM/VINYLS	IDING					
GARAGE DOOR	,					
METAL BLDG E	RECTOR					
					y employer shall, as a condition to 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

time the employer applies for a building permit.

APPLICATION NUMBER	CONTRACTOR	PHONE
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF	F A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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.

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ELECTRICAL	Print Name	Signature	
	License #:	202	Phone #:
MECHANICAL/	Print Name	Signature	
A/C	License #: FAULKNEN PLUMB!	NG	Phone #:
PLUMBING/	Print Name Laster C Fay Kner	Signature	Foster C Faulhner
GAS 553	License #: CFC 42642		Phone #: 386-867-4784
ROOFING	Print Name	Signature	
	License #:		Phone #:
SHEET METAL	Print Name	Signature_	
	License #:		Phone #:
FIRE SYSTEM/	Print Name	Signature_	
SPRINKLER	License#:		Phone #:
SOLAR	Print Name	Signature_	
	License #:		Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE		9	
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

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APPLICATION NUMBER	CONTRACTOR	PHONE
THI	S FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE	E OF A PERMIT
In Columbia County and normit u	ill caver all trades doing work at the permitte	ed cita. It is DECLUDED that we have

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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.

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ELECTRICAL	Print Name	Signature
	License #:	Phone #:
MECHANICAL/	Print Name	Signature
A/C	License #:	Phone #:
PLUMBING/	Print Name	Signature
GAS	License #:	Phone #:
ROOFING	Print Name JOKA S Kea	1995-11 Signature
1266	License #: CCC 1328190	Phone #: (904) 259-2760
SHEET METAL	Print Name	Signature
	License #:	Phone #:
FIRE SYSTEM/	Print Name	Signature
SPRINKLER	License#:	Phone #:
SOLAR	Print Name	Signature
	License #:	Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING		74	
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS	1		1,000
CERAMIC TILE			The state of the s
FLOOR COVERING		F) 3	
ALUM/VINYL SIDING		of the state of th	A-1
GARAGE DOOR			0.00
METAL BLDG ERECTOR			

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Contractor Forms: Subcontractor forms: 6/

records of the s Ordinance 39-6	subcontrac 5, a contrac	tors who actually o tor shall require al	did the trade specific v	vork under the po ovide evidence o	te. It is <u>REQUIRED</u> that we have ermit. Per Florida Statute 440 and f workers' compensation or en Columbia County.
			sponsible for the corr vork. Violations will re		g submitted to this office prior to the k orders and/or fines.
ELECTRICAL	Print Name	•		Signature	
	License #:			Phor	e #:
MECHANICAL/ A/C	Print Name License #:			Signature Phon	e #:
PLUMBING/ GAS	Print Name License #:	•		SignaturePhor	ne #: ()
ROOFING	Print Name License #:		arrish, Pres. 948	Signature/ Phor	3 (386)496-0681
SHEET METAL	Print Name License #:	Robert B. CBC0599	Parrish, Pres	SignaturePhor	B (
FIRE SYSTEM/ SPRINKLER	Print Name	100 100 100 100 100 100 100 100 100 100		Signature d/b/a U	NION LASTEEL METAL BUILDINGS  IE #: Post Office Box 537
SOLAR	Print Name License #:	·	**************************************	Signature	Lake Butler, Floride 32054 Phone (386)496-0681 re #: FAX (386)496-4705
Specialty Li	çense	License Number	Sub-Contractors (		Sub-Contractors Signature
MASON					
CONCRETE FIN	IISHER				
FRAMING					
INSULATION					
STUCCO					
STUCCO DRYWALL					
DRYWALL	ALLER				
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Contractor Forms: Subcontractor form: 6/09

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time the employer applies for a building permit.

APPLICATION UMBER

APPLICATION NU	MBER		CONTRACTOR		PHONE
		THIS FORM MU	ST BE SUBMITTED PRIOR T	O THE ISSUA	NCE OF A PERMIT
records of the Ordinance 89- exemption, ge	nubcontrac 6, a contrac neral liabilit	tors who actually tor shall require a cy insurance and a	did the trade specific Il subcontractors to pi valid Certificate of Co	work under rovide evide ompetency l	tted site. It is <u>REQUIRED</u> that we have the permit. Per Florida Statute 440 and ence of workers' compensation or license in Columbia County. In being submitted to this office prior to the
					p work orders and/or fines.
ELECTRICAL	Print Name			Signature	
	License #:				Phone #:
MECHANICAL/	Print Name			_ Signature	
A/C	License #:		AND THE RESERVE OF THE PROPERTY OF THE PROPERT		Phone #:
PLUMBING/	Print Name	)		Signature	
GAS	License #:		/	/	Phone #:
ROOFING	Print Name	1		Signature	
	License #:				Phone #:
SHEET METAL	Print Name			Signature	
	License #:				Phone #:
FIRE SYSTEM/	Print Name			Signature	
SPRINKLER	License#:				Phone #:
SOLAR	Print Name			Signature	
	License #:				Phone #:
Specialty L	icense ,	License Number	Sub-Contractors	Printed Nam	ne Sub-Contractors Signature
MASON					
CONCRETE FIN	NISHER				
FRAMING			Duna	cas	+ Inoulators
INSULATION		000741	mike D'i	andre	ea truley =
STUCCO			Patsy C	owen	Mile Has authorization
DRYWALL			0		Sign the of form
PLASTER CABINET INST.	ALLED				
PAINTING	ALLEK				\.
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GLASS	LILING	000967	100 W DU	7 - 4 - 6	
CERAMIC TILE		1	0.	Indice	
FLOOR COVER		anot	er Glass	- 756	sepreto shet
				-	

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ALUM/VINYL SIDING GARAGE DOOR

METAL BLDG TRECTOR

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ELECTRICAL	Print Nan.e	Signature
	License #:	Phone #:
MECHANICAL/	Print Name	Signature
A/C	License #:	Phone #:
PLUMBING/	Print Name	Signature
GAS	License #:	Phone #:
ROOFING	Print Name	Signature
	License #:	Phone #:
SHEET METAL	Print Name	
	License #:	Phone #:
FIRE SYSTEM/	Print Name	Signature
SPRINKLER	License#:	Phone #:
SOLAR	Print Name	Signature
	License #:	Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER	000339	Dale R. Nickelson	Wale R Mickelson
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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APPLICATION NU	JMBER		CONTRACTOR		PHONE		
			MUST BE SUBMITTED PRIOR	TO THE ISSUANCE C	DF A PERMIT		
Ordinance 89-	-6, a contra	ctors who actual ctor shall require	ly did the trade specifi all subcontractors to	c work under the	site. It is <u>REQUIRED</u> that we have permit. Per Florida Statute 440 and of workers' compensation or se in Columbia County.		
Any changes,	the permit	ted contractor is	responsible for the co	rrected form hei	ng submitted to this office prior to the orders and/or fines.		
ELECTRICAL	Print Name						
3	License #:				one#:		
MECHANICAL/	Print Nam	Print Name					
A/C		Print Name License #:					
PLUMBING/	Print Nam	е					
GAS	License #:			Signature	one II:		
ROOFING	Print Name	Print Name					
	License #:			Signature Phone #:			
SHEET METAL	Print Name						
	License #:			SignaturePhone #:			
FIRE SYSTEM/	Print Name						
SPRINKLER	Print NameLicense#:			SignaturePhone #:			
SOLAR	Print Name						
301711	License #:			SignaturePhone #:			
Specialty Li	cense	License Number					
MASON	CHISC	cicense ivamber	Sub-Contractors	Printed Name	Sub-Contractors Signature		
CONCRETE FIN	ISHER						
FRAMING					-		
INSULATION							
STUCCO							
DRYWALL							
PLASTER							
CABINET INSTA	LLER			117 - 1			
PAINTING							
ACOUSTICAL CI	EILING		N F1, 60	155	2 1 1		
GLASS		122	North Flor	rida Glas	Kirke Sunnett		
CERAMIC TILE			Richard Be	nnett			
LOOR COVERI							
ALUM/VINYL SI	DING						

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1/0 kg

**GARAGE DOOR** 

METAL BLDG ERECTOR

APPLICATION NUM	MBER	CONTRACTOR PHONE
	THIS FORM MUST	BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
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		oonsible for the corrected form being submitted to this office prior to the rk. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name License #:	Signature Phone #:
MECHANICAL/	Print Name License #:	SignaturePhone #:
PLUMBING/ GAS	Print Name License #:	SignaturePhone #:
ROOFING	Print Name License #:	SignaturePhone #:
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature Phone #:
SOLAR	Print Name_ License #:	SignaturePhone #:
Specialty Li	çense " License Number	Sub-Contractors Printed Name Sub-Contractors Signature
MASON		222 23 23.0.3 36
CONCRETE FIN	ISHER	
FRAMING		
INSULATION		
STUCCO		
DRYWALL		
PLASTER		
CABINET INSTA	ALLER	
PAINTING		
ACOUSTICAL C	EILING	
GLASS		
CERAMIC TILE		
FLOOR COVERI	NG	
ALUM/VINYL SIDING		SANTA FE OH DOOM

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LAMAR BEAR

GARAGE DOOR 604 METAL BLDG ERECTOR