

**SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER 1408-17 CONTRACTOR Owner PHONE \_\_\_\_\_

**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.**

<input checked="" type="checkbox"/> ELECTRICAL 267	Print Name <u>Michael O. Herlong</u> License #: <u>ER0009781</u>	Signature <u>[Signature]</u> Phone #: <u>386 365 0169</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C 327	Print Name <u>Harry Moseley</u> License #: <u>RA0030316</u>	Signature <u>[Signature]</u> Phone #: <u>386-288-9300</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS 1081	Print Name <u>Latolfe Plumbing</u> License #: <u>CFC051621</u>	Signature <u>[Signature]</u> Phone #: <u>386-9350616</u>
<input checked="" type="checkbox"/> ROOFING 264	Print Name <u>Michael Herlong</u> License #: <u>RC0029437</u>	Signature <u>see Above</u> Phone #: <u>365-0169</u>
SHEET METAL	Print Name <u>N/A</u> License #.	Signature _____ Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License#:	Signature _____ Phone #:
SOLAR	Print Name <u>N/A</u> License #	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<input checked="" type="checkbox"/> MASON	<u>000620</u>	<u>Brant Stearns</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	<u>Owner</u>	<u>Owner</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> FRAMING 263	<u>RB0029437</u>	<u>Columbia Home Builders</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> INSULATION	<u>Owner</u>	<u>Owner</u>	<u>[Signature]</u>
STUCCO	<u>N/A</u>		
<input checked="" type="checkbox"/> DRYWALL	<u>Owner</u>	<u>Owner</u>	<u>[Signature]</u>
PLASTER	<u>N/A</u>		
CABINET INSTALLER	<u>N/A</u>		
<input checked="" type="checkbox"/> PAINTING	<u>Owner</u>	<u>Owner</u>	<u>[Signature]</u>
ACOUSTICAL CEILING	<u>N/A</u>		
GLASS	<u>N/A</u>		
<input checked="" type="checkbox"/> CERAMIC TILE	<u>1263</u>	<u>Van CPTON</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> FLOOR COVERING	<u>TTO</u>	<u>Van CPTON</u>	<u>[Signature]</u>
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR	<u>N/A</u>		

**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.

*Yvette, Chidrew, Big*