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ELECTRIÇAL

FLOOR COVERING
ALUM/VINYL SIDING

GARAGE DOOR

METAL BLDG ERECTOR

BUILDING AND ZONING

Print Name

02-19-2014

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PATE PARTY	~ * ~ ~ ~ ~	VERIFICATION	

APPLIGATION NUMBER	CONTRACTOR JAJALICTUR	PHONE	<u> </u>	82
	THIS FORM MILIST RESIGNITTED PRIOR TO THE ISSIANCE 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.

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.

Signature_

	License #:				Phone #:	
MECHANICAL/ A/C	Print Name License#:	ns		Signature	Phone #:	
PLUMBING/ GAS	Print Name License #:	n A		Signature	Phone #:	
ROOFING	Print Name License#:	MA		Signature	Phone #:	1 July 1964 Maria
SHEET METAL	Print Name License #:	N A		Signature	Phone #:	
FIRE SYSTEM/ SPRINKLER	Print Name License#:	NA.		Signature	Phone #:	
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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.

SUBCONTRACTOR VERIFICATION FORM

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APPLICATION NUMBER	14002-30	CONTRACTOR WAY MICTON	PHONE	1,0 5	
	THIS FORM MUST BE	SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT			

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ELECTRIÇAL	Print Name	NA		Signature	•	**************************************
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ROOFING	Print Name	nA		Signature_		
	License #:				Phone #:	
SHEET METAL	Print Name	n A		Signature		
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FIRE SYSTEM/	Print Name	NA		Signature_		
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Contractor Forms. Subcontractor form 6/09