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JOB NAME



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THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

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.

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	Print Name <u>Dennis Conklin</u>	Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
☒	Company Name: <u>D & S Lighting & Electric</u>		
CC#	License #: <u>13003800</u>	Phone #: <u>386-623-9055</u>	
MECHANICAL/A/C	Print Name <u>D.L. Williams</u>	Signature <u>[Signature]</u>	Need Lic Liab W/C EX 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	Print Name <u>Ken Roche</u>	Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
☒	Company Name: <u>Ken Roche Plumbing Now</u>		
CC#	License #: <u>CFC 1426527</u>	Phone #: <u>386-755-9243</u>	
ROOFING	Print Name <u>Trent Giebeig</u>	Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
☒	Company Name: <u>Trent Giebeig Construction, Inc.</u>		
CC#	License #: <u>CRC 1330693</u>	Phone #: <u>386-397-0545</u>	
SHEET METAL	Print Name _____	Signature _____	Need Lic Liab W/C EX DE
☐	Company Name: _____		
CC#	License #: _____	Phone #: _____	
FIRE SYSTEM/SPRINKLER	Print Name _____	Signature _____	Need Lic Liab W/C EX DE
☐	Company Name: _____		
CC#	License #: _____	Phone #: _____	
SOLAR	Print Name _____	Signature _____	Need Lic Liab W/C EX DE
☐	Company Name: _____		
CC#	License #: _____	Phone #: _____	
STATE SPECIALTY	Print Name _____	Signature _____	Need Lic Liab W/C EX DE
☐	Company Name: _____		
CC#	License #: _____	Phone #: _____	