## SUBCONTRACTOR VERIFICATION FORM

PPLICATION	NUMBER	}	3	1 (	***	Ļ

CONTRACTOR KEBERCY Shomes PHONE 623. 5079

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.

			14 4
	ELECTRICAL 76	Print Name MATTHEUS ELECTRC INCLICEnse #: EC 130050	159 Phone #: 386-244-2029
	A/C 802	Print Name Wilson Heat and Air Inc License #. CACOS7886	- Cat Web
V	PLUMBING/ GAS 298	Print Name Howe Town Planting License #: CFC 1428	Signature Da c Bill 9 v  9890 Phone #: 886=7576140
4	ROOFING-	Print Name Rebecca Thomas License #: CBC1256094	
	SHEET METAL	Print Name V-A License #:	SignaturePhone #.
	FIRE SYSTEM/ SPRINKLER	Print Name N-A License#:	SignaturePhone #:
	SOLAR	Print Name // A License #:	SignaturePhone #:

License Number	<b>Sub-Contractors Printe</b>	d Name	Sub-Contractors Signature	
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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.

COCCITICION VOID TORNION TORNIO

APPLICATION MUMBER	13/152	CONTRACTOR_	Rebecca Thomas	PHONE 623 - 507		
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ELECTRICAL	Print NameLicense #:	SignaturePhone #:
MECHANICAL/ A/C	Print Name License #:	SignaturePhone #;
PLUMBING/ GAS	Print Name License #:	SignaturePhone #:
ROOFING	Print Name License #:	SignaturePhone #:
SHEET METAL	Print Name License #:	SignaturePhone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	SignaturePhone #:
SOLAR	Print NameLicense #:	SignaturePhone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER	160	Mike Trail Cabinuts	Whichard D hand
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ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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2013-12-09 08:10 BULLFROGS AND BUTTER

04:21:12 p.m.

12-09-2013

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APPLICATION NUMBER

3867547088

**BUILDING AND ZONING** 

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311-52	CONTRACTOR RESECU	Shome	PHONE 623. 5079
THIS FORM MUST BE	SUBMITTED PRIOR TO THE ISSUANCE	OF A PERMIT	

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