

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____

JOB NAME

Franks/

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. 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 general contractors permit.

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.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

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 _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE
MECHANICAL/A/C ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE
PLUMBING/GAS ☐	Print Name _____ Signature <u>Colby Davis</u> Company Name: <u>Burns Plumbers</u> License #: <u>CFC 1457145</u> Phone #: <u>786 823-0509</u>	Need Lic Liab W/C EX DE
ROOFING ☐	Print Name <u>Bradley Franks</u> Signature <u>Bradley Franks</u> Company Name: <u>Bradley Franks Construction</u> License #: <u>RG291103874</u> Phone #: <u>386-755-2455</u>	Need Lic Liab W/C EX DE
SHEET METAL ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE
FIRE SYSTEM/SPRINKLER ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE
SOLAR ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE
STATE SPECIALTY ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need Lic Liab W/C EX DE

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MECHANICAL/A/C ☐ CC# _____	Print Name <u>Anthony Franks</u> Signature <u>[Signature]</u> Company Name: <u>Franks & Lane Heating and Air, LLC</u> License #: <u>CAC1018631</u> Phone #: <u>306-466-7514</u>	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/GAS ☐ CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING ☐ CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SHEET METAL ☐ CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
FIRE SYSTEM/SPRINKLER ☐ CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SOLAR ☐ CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
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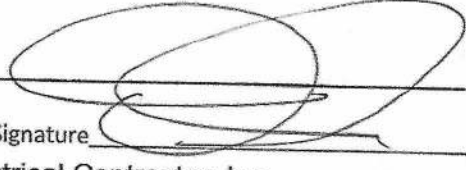
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ELECTRICAL ☐	Print Name <u>Oscar Gray</u> Signature  Company Name: <u>Dependable Htg, A/C & Electrical Contractor, Inc.</u> License #: <u>EC0001471</u> Phone #: <u>904-259-6546</u>	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
MECHANICAL/ A/C ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/ GAS ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING ☐	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need ☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
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