

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR PAMELA J. GILL PHONE 386.965.3165

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.

ELECTRICAL	Print Name <u>Pamela Gill</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____
MECHANICAL/ A/C	Print Name <u>Pamela Gill</u> License #: <u>Owner</u>	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name <u>Pamela Gill</u> License #: <u>Owner</u>	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	_____	_____	_____
CONCRETE FINISHER	_____	_____	_____
FRAMING	<u>Owner</u>	<u>Pamela Gill</u>	<u>[Signature]</u>
INSULATION	<u>Owner</u>	<u>Pamela Gill</u>	
STUCCO	_____	_____	
DRYWALL	<u>Owner</u>	<u>Pamela Gill</u>	
PLASTER	_____	_____	
* CABINET INSTALLER	<u>Owner</u>	<u>Pamela Gill</u>	
* PAINTING	<u>Owner</u>	<u>Pamela Gill</u>	
ACOUSTICAL CEILING	_____	_____	
GLASS	_____	_____	
CERAMIC TILE	<u>Owner</u>	<u>Pamela Gill</u>	
FLOOR COVERING	<u>Owner</u>	_____	_____
* ALUM/VINYL SIDING	<u>Owner</u>	_____	_____
GARAGE DOOR	<u>Owner</u>	_____	_____
METAL BLDG ERECTOR	_____	_____	_____

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.