

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1403-25 CONTRACTOR Brandi Roberts PHONE 754-5555

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.

<input checked="" type="checkbox"/> ELECTRICAL 76	Print Name <u>MARC MATTHEWS</u> License #: <u>EC13005459</u>	Signature <u><i>Marc Matthews</i></u> Phone #: <u>386 344-2029</u>
<input checked="" type="checkbox"/> MECHANICAL/A/C 1052	Print Name <u>Richard Register</u> License #: <u>CAC041267</u>	Signature <u><i>Richard C. Register</i></u> Phone #: <u>904-384-2862</u>
PLUMBING/GAS	Print Name <u>N/A</u> License #:	Signature _____ Phone #:
ROOFING	Print Name <u>N/A</u> License #:	Signature _____ Phone #:
SHEET METAL	Print Name <u>N/A</u> License #:	Signature _____ Phone #:
FIRE SYSTEM/SPRINKLER	Print Name <u>N/A</u> License#:	Signature _____ Phone #:
SOLAR	Print Name <u>N/A</u> License #:	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON	_____	_____	_____
<input checked="" type="checkbox"/> CONCRETE FINISHER	000218	Tony Jordan	<i>Tony Jordan</i>
<input checked="" type="checkbox"/> FRAMING	000177	Mevin Mitchell	<i>Mevin Mitchell</i>
<input checked="" type="checkbox"/> INSULATION 399	CBC1257313	Brandi Roberts	<i>Brandi Roberts</i>
<input checked="" type="checkbox"/> STUCCO 399	CBC1257313	Brandi Roberts	<i>Brandi Roberts</i>
<input checked="" type="checkbox"/> DRYWALL 399	CBC1257313	Brandi Roberts	<i>Brandi Roberts</i>
PLASTER	_____	_____	_____
CABINET INSTALLER	_____	_____	_____
<input checked="" type="checkbox"/> PAINTING	000180	Scott Vogel	<i>Scott Vogel</i>
<input checked="" type="checkbox"/> ACOUSTICAL CEILING 399	CBC1257313	Brandi Roberts	<i>Brandi Roberts</i>
<input checked="" type="checkbox"/> GLASS	000619	CARI Bullard	<i>Cari Bullard</i>
CERAMIC TILE	_____	_____	_____
<input checked="" type="checkbox"/> FLOOR COVERING	000546	Ryan Hardin	<i>Ryan Hardin</i>
ALUM/VINYL SIDING	_____	_____	_____
GARAGE DOOR	_____	_____	_____
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.