

# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # App# 5482 JOB NAME Calver's Lake City, FL  
21244

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.

<b>ELECTRICAL</b> <input type="checkbox"/>	Print Name <u>David Ramirez</u> Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
CC#	Company Name: <u>DRC Electric</u> License #: <u>EC13063788</u> Phone #: <u>352-348-1321</u>	
<b>MECHANICAL/A/C</b> <input type="checkbox"/>	Print Name <u>Mark A. Lowery</u> Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
CC#	Company Name: <u>JAX HVAC, INC.</u> License #: <u>CMC1250544</u> Phone #: <u>352-544-1100</u>	
<b>PLUMBING/GAS</b> <input type="checkbox"/>	Print Name <u>Ronald D. Cochran</u> Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
CC#	Company Name: <u>Cochran Plumbing services</u> License #: <u>UFC1429154</u> Phone #: <u>386-208-8080</u>	
<b>ROOFING</b> <input type="checkbox"/>	Print Name <u>George Ryan Dean</u> Signature <u>[Signature]</u>	Need Lic Liab W/C EX DE
CC#	Company Name: <u>Everdean Construction</u> License #: <u>CCC1330727</u> Phone #: <u>863-888-0724</u>	
<b>SHEET METAL</b> <input type="checkbox"/>	Print Name _____ Signature _____	Need Lic Liab W/C EX DE
CC#	Company Name: _____ License #: _____ Phone #: _____	
<b>FIRE SYSTEM/SPRINKLER</b> <input type="checkbox"/>	Print Name _____ Signature _____	Need Lic Liab W/C EX DE
CC#	Company Name: <u>N/A</u> License #: _____ Phone #: _____	
<b>SOLAR</b> <input type="checkbox"/>	Print Name _____ Signature _____	Need Lic Liab W/C EX DE
CC#	Company Name: <u>N/A</u> License #: _____ Phone #: _____	
<b>STATE SPECIALTY</b> <input type="checkbox"/>	Print Name _____ Signature _____	Need Lic Liab W/C EX DE
CC#	Company Name: <u>N/A</u> License #: _____ Phone #: _____	