

# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME \_\_\_\_\_

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<br><input type="checkbox"/>                | Print Name: <u>Donald Davis</u> Signature: <u>[Signature]</u>      | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: <u>High Springs Electric &amp; Air</u>               |                                                                                                                                                            |
|                                                       | License #: <u>EC 0002306</u> Phone #: <u>386-623-4895</u>          |                                                                                                                                                            |
| MECHANICAL/<br>A/C<br><input type="checkbox"/>        | Print Name: <u>Timothy D. Shatto</u> Signature: <u>[Signature]</u> | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: <u>Shatto Heating &amp; Air</u>                      |                                                                                                                                                            |
|                                                       | License #: <u>CAC 057875</u> Phone #: <u>386-496-8224</u>          |                                                                                                                                                            |
| PLUMBING/<br>GAS<br><input type="checkbox"/>          | Print Name: <u>Ronald J. Cochran</u> Signature: <u>[Signature]</u> | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: <u>Cochran Plumbing Services, LLC</u>                |                                                                                                                                                            |
|                                                       | License #: <u>CPC 1429154</u> Phone #: <u>386-688-0581</u>         |                                                                                                                                                            |
| ROOFING<br><input type="checkbox"/>                   | Print Name: <u>Caleb Wentworth</u> Signature: <u>[Signature]</u>   | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: <u>Wentworth Construction Services, LLC</u>          |                                                                                                                                                            |
|                                                       | License #: <u>CCC 1834975</u> Phone #: <u>850-295-3016</u>         |                                                                                                                                                            |
| SHEET METAL<br><input type="checkbox"/>               | Print Name: _____ Signature: _____                                 | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: _____                                                |                                                                                                                                                            |
|                                                       | License #: _____ Phone #: _____                                    |                                                                                                                                                            |
| FIRE SYSTEM/<br>SPRINKLER<br><input type="checkbox"/> | Print Name: _____ Signature: _____                                 | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: _____                                                |                                                                                                                                                            |
|                                                       | License #: _____ Phone #: _____                                    |                                                                                                                                                            |
| SOLAR<br><input type="checkbox"/>                     | Print Name: _____ Signature: _____                                 | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: _____                                                |                                                                                                                                                            |
|                                                       | License #: _____ Phone #: _____                                    |                                                                                                                                                            |
| STATE<br>SPECIALTY<br><input type="checkbox"/>        | Print Name: _____ Signature: _____                                 | <input type="checkbox"/> Lic<br><input type="checkbox"/> Sub<br><input type="checkbox"/> W/C<br><input type="checkbox"/> CA<br><input type="checkbox"/> CE |
| CCB                                                   | Company Name: _____                                                |                                                                                                                                                            |
|                                                       | License #: _____ Phone #: _____                                    |                                                                                                                                                            |

Ref: F.S. 440.103; ORD. 2016-30

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