## SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #	JOB NAME
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## 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 <a href="REQUIRED">REQUIRED</a> 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 Ryan Beville Signature Ryan Beville	<u>Need</u> □ Lic
	Company Name: RBI ELECTORES CONCESCAME . CCC	□ Liab □ W/C
cc#_ 811	License #: EC 1300 4236 Phone #: 352 - 339 - 0369	□ EX
MECHANICAL/	Print Name Tim Shatto Signature Tim Shatto	Need
A/C	Company Name: Show Hearing & AIR, DC	□ Lic □ Liab
cc#_770	License #: <u>CAC057875</u> Phone #: <u>386 - 496-8204</u>	□ W/C
PLUMBING/	Print Name CODY BARRS Signature Cody Barrs	- DE DE
GAS	Company Name: Roses Of A Signature Cody Dans	□ Lic
cc# 715	Company Name: Barrs Plumby Drc.	□ Liab □ W/C
CC#	License #: CFC1427145 Phone #: 386 - 752 - 8656	□ EX
ROOFING	Print Name KEVIN BEDENBONG & Signature COST	<u>Need</u> □ Lic
	Company Name: Plumb Level Conspension Colice	□ Liab
cc#_1056	License #:	□ W/C
SHEET METAL	Print NameSignature	DE Need
	Company Name:	□ Lic □ Liab
CC#	License #: Phone #:	□ w/c □ ex
FIRE SYSTEM/	Print NameSignature	□ DE Need
SPRINKLER	Company Name:	□ Lic □ Liab
CC#	License#: Phone #:	□ W/C
SOLAR	Print NameSignature	□ DE Need
	Company Name:	□ Lic □ Liab
CC#		□ w/c □ EX
CTATE	License #: Phone #:	□ DE
STATE	Print Name Signature	<u>Need</u> □ Lic
SPECIALTY	Company Name:	☐ Liab □ W/C
CC#	License #: Phone #:	□ EX □ DE
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Ref: F.S. 440.103; ORD. 2016-30