

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1206.29

CONTRACTOR

ADAM PARYA

PHONE 386-623-2883

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 380	Print Name: DONALD DAVIS License #: EC0002306	Signature: <i>[Signature]</i> Phone #: 386-623-0449
<input checked="" type="checkbox"/> MECHANICAL/ A/C 568	Print Name: DAVID JAMES INC License #: CAC057424	Signature: <i>[Signature]</i> Phone #: 755-9792
<input checked="" type="checkbox"/> PLUMBING/ GAS 714	Print Name: MARK B. BARRS License #: CR057219	Signature: <i>[Signature]</i> Phone #: 752-8656
<input checked="" type="checkbox"/> ROOFING 494	Print Name: CALEB LAUGHLIN License #: CCC1327718	Signature: <i>[Signature]</i> Phone #: 752-4022
SHEET METAL	Print Name: <i>NA</i> License #: <i>NA</i>	Signature: <i>NA</i> Phone #: <i>NA</i>
FIRE SYSTEM/ SPRINKLER	Print Name: <i>NA</i> License #: <i>NA</i>	Signature: <i>NA</i> Phone #: <i>NA</i>
SOLAR	Print Name: <i>NA</i> License #: <i>NA</i>	Signature: <i>NA</i> Phone #: <i>NA</i>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<input checked="" type="checkbox"/> MASON	00157	FRANK CROFT	<i>[Signature]</i>
<input checked="" type="checkbox"/> CONCRETE FINISHER	48	BEN LOFSTROM	<i>[Signature]</i>
FRAMING	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
INSULATION	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
STUCCO	NA		
<input checked="" type="checkbox"/> DRYWALL 000345		WADE HEITZMAN	<i>[Signature]</i>
<input checked="" type="checkbox"/> PLASTER	1		
CABINET INSTALLER	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
PAINTING	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
ACOUSTICAL CEILING	NA		
GLASS	NA		
<input checked="" type="checkbox"/> CERAMIC TILE	152	TREVOR BLANK	<i>[Signature]</i>
FLOOR COVERING	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
ALUM/VINYL SIDING	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
GARAGE DOOR	CBC1253409	ADAM'S FRAMING	<i>[Signature]</i>
METAL BLDG ERECTOR	NA		

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.