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 <u>REQUIRED</u> 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

Violations will result in stop work orders and/or fines.

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.

| ELECTRICAL | Print Name Yordan Carrazana Signature | Need ☐ Lic ☐ Liab |
|--------------|------------------------------------------------------------|----------------------|
| | Company Name: Best Lighting Electric | □ W/C |
| CC# | License #: £C 3007882 Phone #: 561.566.3213 | □ EX □ DE |
| MECHANICAL/ | Print Name Albert Heal Signature | <u>Need</u> □ Lic |
| A/C | Company Name: All 4 Construction Corp | □ Liab |
| | · · · · · · · · · · · · · · · · · · · | □ W/C |
| CC# | License #: CMC1249873 Phone #: 561.662.7665 | □ DE |
| PLUMBING/ | Print Name Albert Heal Signature | Need □ Lic |
| GAS | Company Name: All 4 Construction Cour | □ Liab |
| | | □ W/C □ EX |
| CC# | License #: <u>CFC1428037</u> Phone #: <u>\$61.662.2665</u> | □ DE |
| ROOFING | Print NameSignature | <u>Need</u> □ Lic |
| | · · · · · · · · · · · · · · · · · · · | ☐ Liab |
| | Company Name: | □ w/c |
| CC# | License #: Phone #: | □ EX □ DE |
| SHEET METAL | Print NameSignature_ | Need |
| SHEET WEIAL | | ☐ Lic ☐ Liab |
| | Company Name: | □ w/c |
| CC# | License #: Phone #: | □ EX □ DE |
| FIRE SYSTEM/ | Print Name Signature | Need □ Lic |
| SPRINKLER | Company Name: | □ Liab □ W/C |
| | 8 | □ EX |
| CC# | License#: Phone #: | □ DE |
| SOLAR | Print Name Signature | Need □ Lic |
| | Company Name: | □ Liab |
| | | □ W/C |
| CC# | License #: Phone #: | □ DE |
| STATE | Print Name | <u>Need</u> □ Lic |
| J.A.L. | Print Name Signature | □ Liab |
| SPECIALTY | Company Name: | □ w/c |
| CC# | License #: Phone #: | □ EX |

SUBCONTRACTOR VERIFICATION

| APPLICATION/PERMIT # | JOE | B 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 <u>REQUIRED</u> 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.

| submitted to our office, before that work has begun. | | | | | |
|----------------------------------------------------------|---------------------------------------------------------------|----------------------|--|--|--|
| Violations will result in stop work orders and/or fines. | | | | | |
| | Vanda Canacaca | Need | | | |
| ELECTRICAL | Print Name YORDON CARRAZANG ignature | □ Lic □ Liab | | | |
| | Company Name: Best lighting Electric | □ w/c | | | |
| CC# | License #: £C 13007882 Phone #: 561.566.3213 | □ EX □ DE | | | |
| MECHANICAL/ | Print Name Albert Heal Signature | <u>Need</u> □ Lic | | | |
| A/C | Company Name: All 4 Construction Corp | □ Liab | | | |
| | License #: CMC 1249873 Phone #: 561; 662 · 7665 | □ W/C | | | |
| CC# | 3 300 | □ DE | | | |
| PLUMBING/ | Print Name Albert Heal Signature | Need □ Lic | | | |
| GAS | Company Name: All 4 Construction Corp | □ Liab | | | |
| | | □ w/c | | | |
| CC# | License #: <u>CFC 1428037</u> Phone #: <u>561</u> . 662. 2665 | □ DE | | | |
| ROOFING | Print Name Maday Dicz Signature | Need □ Lic | | | |
| | company Name: Digz Homes & Construction (grap | □ Liab | | | |
| | | □ W/C | | | |
| CC# | License #: CRC 1332651 Phone #: 561.317.8752 | □ EX | | | |
| SHEET METAL | Print NameSignature | <u>Need</u> □ Lic | | | |
| | | □ Liab | | | |
| | Company Name: | □ W/C | | | |
| CC# | License #: Phone #: | □ DE | | | |
| FIRE SYSTEM/ | Print NameSignature | Need □ Lic | | | |
| | | □ Liab | | | |
| SPRINKLER | Company Name: | □ w/c | | | |
| CC# | License#:Phone #: | □ EX □ DE | | | |
| SOLAR | Print NameSignature | Need | | | |
| | Company Name: | □ Liab | | | |
| | | □ W/C | | | |
| CC# | License #:Phone #: | □ DE | | | |
| STATE | Print NameSignature | Need □ Lic | | | |
| | | □ Liab | | | |
| SPECIALTY | Company Name: | □ w/c | | | |
| | | □ EX | | | |