

# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 62708 JOB NAME Dana & Terese Home

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.

*We are the Owner/Builders working as the General Contractor*  
**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.

*Owner Builders*

*See "notes"*

<b>ELECTRICAL</b>	Print Name <u>Dana Thune</u> Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/>	Company Name: <u>Owner/Builder</u>	
CC# _____	License #: _____ Phone #: _____	
<b>MECHANICAL/A/C</b>	Print Name <u>Dana Thune</u> Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/>	Company Name: <u>Owner/Builder</u>	
CC# _____	License #: _____ Phone #: _____	
<b>PLUMBING/GAS</b>	Print Name <u>Dana Thune</u> Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/>	Company Name: <u>Owner/Builder</u>	
CC# _____	License #: _____ Phone #: _____	
<b>ROOFING</b>	Print Name <u>ELITE OUTDOOR BLDGS</u> Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/>	Company Name: <u>ELITE OUTDOOR BLDGS LLC</u>	
CC# _____	License #: <u>CBC1265691</u> Phone #: <u>386-365-0777</u>	
<b>SHEET METAL</b>	Print Name <u>ELITE</u> Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/>	Company Name: <u>ELITE OUTDOOR BLDGS LLC</u>	
CC# _____	License #: <u>CBC1265691</u> Phone #: <u>386-365-0777</u>	
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: _____	
CC# _____	License #: _____ Phone #: _____	
<b>SOLAR</b>	Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: _____	
CC# _____	License #: _____ Phone #: _____	
<b>STATE SPECIALTY</b>	Print Name _____ Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: _____	
CC# _____	License #: _____ Phone #: _____	