APPLICATION/PERMIT # _

ranks 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

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.

ELECTRICAL	Print Name	Signature	Need
	Company Name:		- I Lic I Liab
CC#		Dh	C W/C
MECHANICAL/	License #:	Phone #	- <u>-</u> DE
A/c		ature	Need I Lic
CC#	Company Name:	201.755 0-00	⊥ Liab □ W/C
<u></u>	License #:	201-756 0-00	X3 I
PLUMBING/	Print Name	Signature Cole News	Need
GAS	Company Name: DUUS	hie	⊥ Liab
CC#	License #:	Phone #: 786 823-0505	□ W/C □ EX
ROOFING	Print Name Bradley Franks	Simaling Dealth	C DE
	Company Name: Bradley Franks Co	methy ching	□ Uc
CC#		Phone #: 386-755-2455	⊆ Liab ⊆ W/C
SHEET METAL	Print Name		C EX C DE
	Company Name:	ngnature	Meed Lic
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FIRE SYSTEM/		hone #:	I EX I DE
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Violations will result in stop work orders and/or fines.

Ref: F.S. 440,103; ORD. 2016-30

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #_____

JOB NAME

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ELECTRICAL	Print NameSignature	Need
	Company Name:	🗆 Llab
CC#	License #: Phone #:	. ⊐ w/c ⊐ ex
MECHANICAL/	Print Name Anthony Franks Signature Att M	DE <u>Need</u> C Lic
A/C	company Name: Franks & Lane Heating and air, the	
CC#	License #: CAC 10106031 Phone #: 306-466-7514	⊐ w/c ⊐ ex
PLUMBING/	Print Name Signature	DE <u>Need</u>
GAS	Company Name:	- I Lic I Liab
CC#	License #: Phone #:	I W/C I EX
ROOFING	Print NameSignature	DE <u>Need</u>
	Company Name:	I Lic I Liab
CC#	License #: Phone #:	I W/C I EX
SHEET METAL	Print NameSignature	I DE Need
	Company Name:	□ Lic □ Liab
CC#	License #: Phone #:	I w/c I EX I DE
FIRE SYSTEM/	Print NameSignature	Need
	Company Name:	□ Lic □ Liab □ W/C
CC#	License#: Phone #:	I EX
SOLAR	Print NameSignature	<u>Need</u>
	Company Name:	🗆 Liab
CC#	License #: Phone #:	I W/C I EX
	Print NameSignature	C DE <u>Need</u> C Lic
SPECIALTY	Company Name:	🗆 Liab
CC#	License #: Phone #:	C W/C C EX C DE

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

SUBCONTRACTOR VERIFICATION

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ELECTRICAL	Print Name Oscar Gray Signature	2	Need
	Company Name: Dependable Htg, A/C & Electrical Contractor, Inc.		🗆 🗆 Liab
CC#	License #: EC0001471 Phone #: 904-259-6546		_□ W/C □ EX
MECHANICAL/			D DE
	Print Name Signature		Need □ Lic
A/C	Company Name:		□ Liab □ W/C
CC#	License #: Phone #:		□ EX
PLUMBING/	Print Name Signature		DE <u>Need</u>
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CC#	Company Name:		□ w/c
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SHEET METAL	Print NameSignature		DE <u>Need</u>
	Company Name:		□ Lic □ Liab
CC#	License #: Phone #:	147.992	D W/C D EX D DE
FIRE SYSTEM/	Print NameSignature		Need
SPRINKLER	Company Name:		C Lic C Liab
CC#	License#: Phone #:		I EX I EX I DE
SOLAR	Print NameSignature		Need
	Company Name:		🗆 Liab
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STATE	Print NameSignature		DE DE
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	Company Name:		□ w/c
CC#	License #: Phone #:		D EX D DE

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