

# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME Raphael Residence

**THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED**


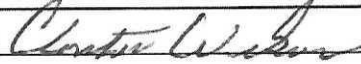


Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

**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.

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| <b>ELECTRICAL</b><br><input checked="" type="checkbox"/>             | Print Name <u>Benjamin Sparks</u> Signature <u></u><br>Company Name: <u>Line Electric</u><br>License #: <u>EC13009101</u> Phone #: <u>386-361-0046</u>           | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>MECHANICAL/</b><br><b>A/C</b> <input checked="" type="checkbox"/> | Print Name <u>CLINTON WILSON</u> Signature <u></u><br>Company Name: <u>WILSON HEAT &amp; AIR INC</u><br>License #: <u>CAC057886</u> Phone #: <u>386.496.9000</u> | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>PLUMBING/</b><br><b>GAS</b> <input checked="" type="checkbox"/>   | Print Name <u>Cody Barrs</u> Signature <u></u><br>Company Name: <u>Barrs Plumbing</u><br>License #: <u>CFC1427145</u> Phone #: <u>386-752-8656</u>              | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>ROOFING</b><br><input checked="" type="checkbox"/>                | Print Name <u>Ralph Laverdure</u> Signature <u></u><br>Company Name: <u>RWL Roofing</u><br>License #: <u>CCC1328590</u> Phone #: <u>386-623-0178</u>           | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SHEET METAL</b><br><input type="checkbox"/>                       | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____   | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>FIRE SYSTEM/</b><br><b>SPRINKLER</b> <input type="checkbox"/>     | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____   | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SOLAR</b><br><input type="checkbox"/>                             | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____   | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>STATE</b><br><b>SPECIALTY</b> <input type="checkbox"/>            | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____   | <u>Need</u><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |