

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 **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.

ELECTRICAL <input type="checkbox"/>	Print Name <u>Donald Davis</u> Signature <u>[Signature]</u>	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: <u>High Springs Electric & Air</u>	
	License #: <u>EC 0002306</u> Phone #: <u>386-623-4895</u>	
MECHANICAL/ A/C <input type="checkbox"/>	Print Name <u>Timothy D. Shatto</u> Signature <u>[Signature]</u>	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: <u>Shatto Heating & Air</u>	
	License #: <u>CAC 057875</u> Phone #: <u>386-496-8224</u>	
PLUMBING/ GAS <input type="checkbox"/>	Print Name <u>Ronald J. Cochran</u> Signature <u>[Signature]</u>	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: <u>Cochran Plumbing Services, LLC</u>	
	License #: <u>CPCL 1429154</u> Phone #: <u>386-688-3581</u>	
ROOFING <input type="checkbox"/>	Print Name <u>Caleb Wentworth</u> Signature <u>[Signature]</u>	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: <u>Wentworth Construction Services, LLC</u>	
	License #: <u>CCC 1834975</u> Phone #: <u>850-295-3016</u>	
SHEET METAL <input type="checkbox"/>	Print Name _____ Signature _____	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: _____	
	License #: _____ Phone #: _____	
FIRE SYSTEM/ SPRINKLER <input type="checkbox"/>	Print Name _____ Signature _____	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: _____	
	Licensed: _____ Phone #: _____	
SOLAR <input type="checkbox"/>	Print Name _____ Signature _____	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: _____	
	License #: _____ Phone #: _____	
STATE SPECIALTY <input type="checkbox"/>	Print Name _____ Signature _____	<input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> OE
CC# _____	Company Name: _____	
	License #: _____ Phone #: _____	

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

