SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #	JOB NAME Burk

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.

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

ELECTRICAL	_{Print Name} Ryan Beville	Signature Ryan Beville (Sep 2, 2025 20:26:52 GMT+3)	<u>Need</u> □ Lic
	DDI Flootrical Contraction, LLC		
	, ,		□ W/C
CC#	License #: LO 13004230	Phone #: (352)514-0428	□ DE
MECHANICAL/	Print Name Robert Bounds	Signature Robert Bounds Robert Bounds (Sep 3, 2025, 09:00:48 EDT)	<u>Need</u> □ Lic
A/C	✓ Company Name: Bounds Heating and Air. Inc.		
CC#		Phone #: (352) 472-2761	□ W/C □ EX □ DE
PLUMBING/		Cody Barrs Signature Cody Barrs (Sep 3, 2025 14-37:26 EDT)	Need
GAS	Company Name: Barrs Plumbing, Inc.		
		(252) 752 9656	□ W/C
CC#		Phone #: (352) 752-8656	□ DE
ROOFING	_{Print Name} Benjamin Keeler	Signature Benjamin Keeler (Sep 2, 2025 14:47:34 EDT)	<u>Need</u> □ Lic
	Company Name: Keeler Roofing, LLC		□ Liab
			□ W/C
CC#	License #: CCC 1330509	Phone #: (352) 205-4474	□ EX
			L DE
SHEET METAL	Print Name		Need Lic
SHEET METAL			Need
SHEET METAL CC#	Print Name Company Name:	Signature	Need ☐ Lic ☐ Liab
	Print Name	Signature Phone #:	Need Lic Liab W/C EX
CC#	Print Name Company Name: License #:	Signature Phone #:	Need Lic Liab W/C EX DE
CC#FIRE SYSTEM/	Print Name Company Name: License #: Print Name Company Name:	Signature Phone #: Signature	Need
CC# FIRE SYSTEM/ SPRINKLER	Print Name Company Name: License #: Print Name	Signature Phone #: Signature Phone #:	Need
CC# FIRE SYSTEM/ SPRINKLER CC#	Print Name Company Name: License #: Print Name Company Name: License#: Print Name	Signature Phone #: Signature Phone #: Signature	Need
CC# FIRE SYSTEM/ SPRINKLER CC# SOLAR	Print Name	Signature Phone #: Signature Phone #: Signature	Need
CC# FIRE SYSTEM/ SPRINKLER CC#	Print Name Company Name: License #: Print Name Company Name: License#: Print Name	Signature Phone #: Signature Phone #: Signature	Need
CC# FIRE SYSTEM/ SPRINKLER CC# SOLAR CC#	Print Name	SignaturePhone #: Phone #: Signature Phone #: Phone #:	Need
CC# FIRE SYSTEM/ SPRINKLER CC# SOLAR CC# STATE	Print Name Company Name: License #: Print Name Company Name: License#: Print Name Company Name: License #: Print Name Terry Mauldin	Signature Phone #: Phone #: Signature Phone #: Signature Phone #:	Need
CC# FIRE SYSTEM/ SPRINKLER CC# SOLAR CC#	Print Name	Signature Phone #: Phone #: Signature Phone #: Signature Phone #:	Need

Burk - Sub Verifcation Form FILLED OUT 9-2-25

Final Audit Report 2025-09-03

Created: 2025-09-02

By: Ross Hartley (ross@hartleybrothers.com)

Status: Signed

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