

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1207-40 CONTRACTOR Stanley Crawford PHONE 752-5152
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<input checked="" type="checkbox"/> ELECTRICAL 380	Print Name <u>Donald R Davis</u> License #: <u>EC 006 2306</u>	Signature <u>Donald R Davis</u> Phone #: <u>386 623 0499</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name <u>Chad L. Latham</u> License #: <u>CA0057886</u>	Signature <u>Chad L. Latham</u> Phone #: <u>386 754 9408</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name <u>Joseph A. Davis</u> License #: <u>CF0057309</u>	Signature <u>Joseph A. Davis</u> Phone #: <u>386 754 1402</u>
<input checked="" type="checkbox"/> ROOFING 64	Print Name <u>Stanley Crawford</u> License #: <u>RG00042896</u>	Signature <u>Stanley Crawford</u> Phone #: <u>386-752-5152</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty Trade	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
<input checked="" type="checkbox"/> MASON	<u>000712</u>	<u>Colin Gary Moser</u>	<u>Colin Gary Moser</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	<u>218</u>	<u>Jordan Concrete</u>	<u>Jordan Concrete</u>
<input checked="" type="checkbox"/> FRAMING <u>64</u>	<u>CG0012896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> INSULATION	<u>000711</u>	<u>Samuel L. Latham</u>	<u>Samuel L. Latham</u>
STUCCO	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
DRYWALL	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<input checked="" type="checkbox"/> PLASTER	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> CABINET INSTALLER	<u>000064</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> PAINTING	<u>000064</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
ACOUSTICAL CEILING	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<input checked="" type="checkbox"/> GLASS	<u>619</u>	<u>Lake City Glass</u>	<u>Lake City Glass</u>
<input checked="" type="checkbox"/> CERAMIC TILE	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> FLOOR COVERING <u>64</u>	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> ALUM/VINYL SIDING	<u>000312</u>	<u>Columbia Exteriors</u>	<u>Paul R. R. "LIABILITY"</u>
GARAGE DOOR	<u>000619</u>	<u>Lake City Glass</u>	<u>Lake City Glass</u>
METAL BLDG ERECTOR	_____	_____	_____

F. S. 440.103 Building permits; Identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.