## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

				iblo	863-448	0-1044
ATION NUMBER _	65997	CONTRACTOR	Christopher L B	ible	PHONE	
	THIS FORM MUST	BE SUBMITTED PRIOR	R TO THE ISSUANCE O	F A PERMIT		
cords of the surdinance 89-6, temption, gene	ty one permit will cover all bcontractors who actually a contractor shall require a ral liability insurance and a	all subcontractors to a valid Certificate o	o provide evidence of Competency lice	e of workers' ( nse in Columb	compensation or via County.	
ny changes, th	e permitted contractor is	responsible for the	corrected form be	eing submitter ook orders an	a to this office pri ad/or fines.	or to the
tart of that su	be permitted contractor is a becontractor beginning any  Print Name  Whittington E	work. Violations	Will result it stop	0.1	ato this office pri	or to the
iny changes, the	bcontractor beginning any	work. Violations	corrected form be will result in stop w Signature	0.1	lettington	or to the
tart of that su	Print Name Whittington E License #: EC13002957	work. Violations	Signature (	Glen W	lettington	or to the
ELECTRICAL  MECHANICAL	Print Name Whittington E License #: EC13002957  Qua  Print Name Ay MC NC FL	Electric  alifier Form Attached  HVAC	Signature ( Phone #:	386-972-	Littington 1701 Caylin	or to the
ELECTRICAL	Print Name Whittington E License #: EC13002957  Qua	Electric	Signature ( Phone #:  Signature  Phone #:	386-972-	Littington 1701 Caylin	or to the

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.