

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 000047913 JOB NAME Terrance Jones / 220 NE DebGln.

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 _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/A/C <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/GAS <input type="checkbox"/>	Print Name <u>Cody Barrs</u> Signature <u>Cody Barrs</u> Company Name: <u>Barrs Plumbing Inc</u> License #: <u>CFC1427145</u> Phone #: <u>386-752-8656</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/SPRINKLER <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE



Columbia County, FL.

New Residential Construction Permit #000047913

Issued August 17, 2023



* Request inspections by calling 386-719-2023 or visiting <https://www.columbiacountyfla.com/PermitSearch/InspectionCalendar.aspx>

OWNER: JONES TERRANCE LAVAIR, PHONE: 386-466-5795 ADDRESS: 220 NE DEB GLN LAKE CITY, FL 32055

PARCEL: 17-3S-17-04967-066 ZONING: RESIDENTIAL - LOW RSF/MH- FLOOD ZONE: X Coords: 30.24,-82.63
2

SUBDIVISION: FIVE POINTS ACRES UNIT 2 LOT: 6 BLK: PHASE: UNIT: ACRES: 2.63

CONTRACTORS

NAME: ANTHONY GEORGE, JR.

BUSINESS: GEORGE CONSTRUCTION LLC

ADDRESS:
1136 SE HILLBURN DRIVE
ATLANTA, GA 30316

PHONE: 404.212.5050

LICENSE: CGC016583 -

License	License Title	Contractor	Business
EC13005459	ELECTRICAL CONTRACTOR	MARCUS MATTHEWS	MATTHEWS ELECTRIC LLC
RA0030316	CLASS A A/C CONTRACTOR	HARRY D MOSELEY SR	HARRYS HEATING & AIR CONDITIONING INC
CFC051621	PLUMBING CONTRACTOR	SCOTT WOLFE	WOLFE PLUMBING INC.

PROJECT DETAILS

MH HAS BEEN REMOVED PER OWNER
CHECK SIDE AND FRONT SETBACK IN THE FIELD

THIS IS THE CONSTRUCTION OF A:

HEATED AREA (SQFT):

TOTAL AREA (SQFT):

STORIES:

BUILDING CODE CONSTRUCTION TYPE:

BUILDING CODE ELEMENT:

BUILDING CODE OCCUPANCY TYPES:

OCCUPANCY USE TITLE:

SETBACKS FRONT:

SETBACK SIDE 1:

SETBACK SIDE 2:

SETBACKS REAR:

SEPTIC# (00-0000) OR (X00-000):

SERVICE AMPS:

BUILDING CODE EDITION:

Single Family Dwelling

2518

2748

1

V

B

Residential

single family dwelling

25'

10'

10'

15'

23-0580

200

2020 Florida Building Code 7th Edition and 2017 National Electrical Code

NOTICE: Addition to the requirements of this permit, there may be restrictions applicable to this property that may be found in the public records of this county and there may be additional permits required from other governmental entities such as water management districts, state or federal agencies.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

NOTICE: All work is to be completed in accordance with the permitted plans and applicable codes of Columbia County, Florida. In order to maintain a valid permit the work authorized must commence within 180 days of issuance and have an approved inspection within every 180 days thereafter.

MUST POST ON THE JOBSITE: Copies of the Permit and Recorded Notice of Commencement for inspection.

8/17/2023 3:16 PM