

SUBCONTRACTOR VERIFICATION

Mancilla Residence

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"/> CC# _____	Print Name <u>Robert Lynch</u> Company Name: <u>Third Day Electric</u> License #: <u>EC13001947</u>	Signature <u>Robert Lynch</u> Phone #: <u>561.935.8450</u>	Digitally signed by Robert Lynch Date: 2023.05.03 10:16:25 -04'00' Lic Liab W/C EX DE
MECHANICAL/A/C <input type="checkbox"/> CC# _____	Print Name <u>Tim Shatto</u> Company Name: <u>Shatto Heating & Air</u> License #: <u>CAC057875</u>	Signature <u>Timothy D. Shatto</u> Phone #: <u>386.496.8224</u>	Need Lic Liab W/C EX DE
PLUMBING/GAS <input type="checkbox"/> CC# _____	Print Name <u>Cody Barrs</u> Company Name: <u>Barrs Plumbing</u> License #: <u>CFC1427145</u>	Signature <u>Cody Barrs</u> Phone #: <u>386.752.8656</u>	Need Lic Liab W/C EX DE
ROOFING <input type="checkbox"/> CC# _____	Print Name <u>Tabitha Sibel</u> Company Name: <u>RJH Construction</u> License #: <u>CCC1331967</u>	Signature <u>Tabitha Sibel</u> Phone #: <u>954.444.7941</u>	Digitally signed by Tabitha Sibel Date: 2023.05 10:33:59 -04'00' Need Lic Liab W/C EX DE
SHEET METAL <input type="checkbox"/> CC# _____	Print Name <u>N/A</u> Company Name: <u>N/A</u> License #: _____	Signature _____ Phone #: _____	Need Lic Liab W/C EX DE
FIRE SYSTEM/SPRINKLER <input type="checkbox"/> CC# _____	Print Name <u>N/A</u> Company Name: <u>N/A</u> License #: _____	Signature _____ Phone #: _____	Need Lic Liab W/C EX DE
SOLAR <input type="checkbox"/> CC# _____	Print Name <u>N/A</u> Company Name: <u>N/A</u> License #: _____	Signature _____ Phone #: _____	Need Lic Liab W/C EX DE
STATE SPECIALTY <input type="checkbox"/> CC# _____	Print Name <u>N/A</u> Company Name: <u>N/A</u> License #: _____	Signature _____ Phone #: _____	Need Lic Liab W/C EX DE