# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____    JOB NAME **Weaver Residence** _____

## 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.

| Trade | Details | Need |
|---|---|---|
| **ELECTRICAL** ☐ CC# _____ | Print Name Ryan Beulle   Signature *(signed)*<br>Company Name: RBF Electrical Contracting<br>License #: EC 1300 4236   Phone #: 352-514-0428 | Lic / Liab / W/C / EX / DE |
| **MECHANICAL/ A/C** ☐ CC# _____ | Print Name Bobby A. Mobley   Signature *(signed)*<br>Company Name: Elite Crew Services, LLC<br>License #: CAC1820702   Phone #: 786-742-4724 | Lic / Liab / W/C / EX / DE |
| **PLUMBING/ GAS** ☐ CC# _____ | Print Name Robert Faulkner   Signature *(signed)*<br>Company Name: Premier Plumbing & Leak Detection<br>License #: CFC1426552   Phone #: 352 208 6737 | Lic / Liab / W/C / EX / DE |
| **ROOFING** ☐ CC# _____ | Print Name Christopher Parrish   Signature *(signed)*<br>Company Name: Parrish Builders Group<br>License #: CCC1335124   Phone #: 352-275-2688 | Lic / Liab / W/C / EX / DE |
| **SHEET METAL** ☐ CC# _____ | Print Name _____   Signature _____<br>Company Name: _____<br>License #: _____   Phone #: _____ | Lic / Liab / W/C / EX / DE |
| **FIRE SYSTEM/ SPRINKLER** ☐ CC# _____ | Print Name _____   Signature _____<br>Company Name: _____<br>License #: _____   Phone #: _____ | Lic / Liab / W/C / EX / DE |
| **SOLAR** ☐ CC# _____ | Print Name _____   Signature _____<br>Company Name: _____<br>License #: _____   Phone #: _____ | Lic / Liab / W/C / EX / DE |
| **STATE SPECIALTY** ☐ CC# _____ | Print Name _____   Signature _____<br>Company Name: _____<br>License #: _____   Phone #: _____ | Lic / Liab / W/C / EX / DE |