

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	Print Name <u>Dennis Dumas</u>	Signature <u>Dennis Dumas</u>	<input checked="" type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# <u> </u>	Company Name: <u>HIGH SPRINGS ELECTRIC INC</u>	Phone #: <u>386-623-4895</u>	
	License #: <u>ECN0002306</u>		
MECHANICAL/	Print Name <u>Stephen Brisbois</u>	Signature <u>SB</u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
A/C <input checked="" type="checkbox"/>	Company Name: <u>EDIC, AC</u>	Phone #: <u>386-688-7707</u>	
CC# <u> </u>	License #: <u>CAC1819412</u>	Phone #: <u>(386) 623-1409</u>	
PLUMBING/	Print Name <u>Dan Bills</u>	Signature <u>D Bills</u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
GAS <input type="checkbox"/>	Company Name: <u>HOME TOWN PLUMBING</u>		
CC# <u> </u>	License #: <u>CFC1428890</u>	Phone #: <u>386-754-6140</u>	
ROOFING	Print Name <u>Ralph Lavender</u>	Signature <u>RL</u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: <u>RWL Roofing</u>		
CC# <u> </u>	License #: <u>CIC1328590</u>	Phone #: <u>386 423 0178</u>	
SHEET METAL	Print Name <u> </u>	Signature <u> </u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: <u> </u>		
CC# <u> </u>	License #: <u> </u>	Phone #: <u> </u>	
FIRE SYSTEM/	Print Name <u> </u>	Signature <u> </u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SPRINKLER <input type="checkbox"/>	Company Name: <u> </u>		
CC# <u> </u>	License #: <u> </u>	Phone #: <u> </u>	
SOLAR	Print Name <u> </u>	Signature <u> </u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/>	Company Name: <u> </u>		
CC# <u> </u>	License #: <u> </u>	Phone #: <u> </u>	
STATE <input type="checkbox"/>	Print Name <u> </u>	Signature <u> </u>	<input type="checkbox"/> Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SPECIALTY	Company Name: <u> </u>		
CC# <u> </u>	License #: <u> </u>	Phone #: <u> </u>	