

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1304 42 CONTRACTOR Stanley Crawford PHONE 386-752-5152
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<input checked="" type="checkbox"/> ELECTRICAL 380	Print Name: <u>DONALD R DAVIS</u> License #: <u>EC0002306</u>	Signature: <u>Donald R Davis</u> Phone #: <u>386-623-0499</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C 802	Print Name: <u>Clint Wilson</u> License #: <u>CAC057886</u>	Signature: <u>Clint Wilson</u> Phone #: <u>386-496-9000</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS 161	Print Name: <u>Kenneth L. Ault</u> License #: <u>RF11067359</u>	Signature: <u>Kenneth L. Ault</u> Phone #: <u>386-697-3856</u>
<input checked="" type="checkbox"/> ROOFING 64	Print Name: <u>Stanley Crawford</u> License #: <u>RG10042896</u>	Signature: <u>Stanley Crawford</u> Phone #: <u>386-752-5152</u>
SHEET METAL	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SOLAR	Print Name: _____ License #: _____	Signature: _____ Phone #: _____

<input checked="" type="checkbox"/> MASON	<u>000712</u>	<u>Colin Gray Masonry</u>	<u>Colin Gray</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	<u>218</u>	<u>Jordan Concrete</u>	<u>Jordan Jordan</u>
<input checked="" type="checkbox"/> FRAMING 64	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> INSULATION	<u>000741</u>	<u>SunCoast Insulators</u>	<u>Patricia Bowen</u>
STUCCO	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
DRYWALL	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<input checked="" type="checkbox"/> PLASTER 64	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> CABINET INSTALLER	<u>000664</u>	<u>Stanley Crawford Const</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> PAINTING	<u>000664</u>	<u>Stanley Crawford Const</u>	<u>Stanley Crawford</u>
ACOUSTICAL CEILING	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
GLASS	<u>618</u>	<u>Let's Get It Glass</u>	<u>Let's Get It Glass</u>
CERAMIC TILE	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
FLOOR COVERING	<u>CG0042896</u>	<u>Stanley Crawford</u>	<u>Stanley Crawford</u>
<input checked="" type="checkbox"/> ALUM/VINYL SIDING	<u>000312</u>	<u>Columbia Exteriors</u>	<u>Paul Rini</u>
<input checked="" type="checkbox"/> GARAGE DOOR	<u>000619</u>	<u>Lake City Glass</u>	<u>Lake City Glass</u>
METAL BLDG ERECTOR	_____	_____	_____

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.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 130442 CONTRACTOR Stanley Crawford PHONE 752-5152
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>DONALD R DAVIS</u> License #: <u>EC 0002306</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-0499</u>
MECHANICAL/ A/C	Print Name <u>Clint Wilson</u> License #:	Signature _____ Phone #:
PLUMBING/ GAS	Print Name <u>Kenneth E. Ault</u> License #: <u>BF 11067359</u>	Signature <u>[Signature]</u> Phone #: <u>386-647-3856</u>
ROOFING	Print Name _____ License #:	Signature _____ Phone #:
SHEET METAL	Print Name _____ License #:	Signature _____ Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #:	Signature _____ Phone #:
SOLAR	Print Name _____ License #:	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub Contractors Signature
MASON		Colin Gray	
CONCRETE FINISHER		Lonny Jordan	
FRAMING		Stanley Crawford	[Signature]
INSULATION		Patsy Bowen	
✓ STUCCO	000256	Ron David	[Signature]
✓ DRYWALL	000256	Ron David	[Signature]
✓ PLASTER	000256	Ron David	[Signature]
CABINET INSTALLER		Stanley Crawford	[Signature]
PAINTING		Stanley Crawford	[Signature]
ACOUSTICAL CEILING			
GLASS		Patsy Bowen	
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING		Raul Plummer	
✓ GARAGE DOOR 604	0001256116	Lance Bear	[Signature]
METAL BLDG ERECTOR			

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.