		:	SUBCONTRACTOR VERIFI	CATION FORM			
ADDUCATION AND	MADED	31773	CONTRACTOR		PHONE		
APPLICATION NU	VIBER		T BE SUBMITTED PRIOR 1				
records of the Ordinance 89- exemption, ge	subcontrac 6, a contrac neral liabili	tors who actually d tor shall require all ty insurance and a	lid the trade specific I subcontractors to p valid Certificate of Co	work under t rovide evider ompetency lic	ed site. It is <u>REQUIRED</u> that we have the permit. Per Florida Statute 440 and note of workers' compensation or tense in Columbia County.  Seling submitted to this office prior to the		
					work orders and/or fines.		
ELECTRICAL 37	Print Name	DOWALD R. HO EC 1300592	slingsworth	Signature lectri è	Mandalweg Phone #: '3 86 155-5944		
MECHANICAL/	Print Name			Signature_			
A/C	License #:				Phone #:		
PLUMBING/ GAS	Print Name License #:		CEIVE	Signature_	Phone #:		
ROOFING	Print Name License #:	2		Signature_ 2-14	Phone #		
SHEET METAL	Print Name License #:			SignaturePhone #:			
FIRE SYSTEM/ SPRINKLER	Print NameLicense#:			SignaturePhone #:			
SOLAR	Print Name License #:	9			Phone #:		
Specialty I	icense	License Number	Sub-Contractors	Printed Name	Sub-Contractors Signature		
MASON							
CONCRETE FII	NISHER						
FRAMING							
INSULATION							
STUCCO							
DRYWALL							
PLASTER							
CABINET INST	ALLER						
PAINTING							
ACOUSTICAL (	CEILING						
GLASS							
CERAMIC TILE							

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.

Contractor forms Subcontractor form 6/09

FLOOR COVERING
ALUM/VINYL SIDING
GARAGE DOOR

METAL BLDG ERECTOR

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _	1402-37	CONTRACTOR	COUN	GIENN	PHONE 755 647
	THIS FORM MUST BI				

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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.

	and the second s								
タレ	ELECTRICAL 765	Print Name	EC1300		Signature_	Phone #	386-	Do€ (623-11	32
	MECHANICAL/ A/C	Print Name	NA		Signature_	Phone #			
	PLUMBING/ GAS	Print Name	N/A		Signature_	Phone #			
str	ROOFING	Print Name Home Owner Coun GLENN License #			Signature Phone #				
	SHEET METAL	Print NameLicense #:			SignaturePhone #				
	FIRE SYSTEM/ SPRINKLER	Print Name License#		Signature Phone #					
	SOLAR	Print Name License #		Signature Phone #					
	Specialty Li	cense	License Number	Sub-Contractors P	rinted Name	2	Sub-Co	ntractors S	ignature
	ATPSON-		parties,	NA		_			
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_	-INSULATION	855	CGC1514780	MATTHEN HENT			ALTO -		
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	PLASTER			
	CABINET INSTALLER			1
L	PAINTING		COLIN BLENN	Pol Cel
**	ACOUSTICAL CLILING			
	-GLASS			
	-CERAIMIC TILE			
_	FLOOR COVERING			1000
V	AŁUM/VINYL SIDING		COLIN GLENNIE	166 C/a
·/	GARAGE DOOR		COLIN GLENN	Tol-Cl
	MITAL BLOCKER STOR			

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