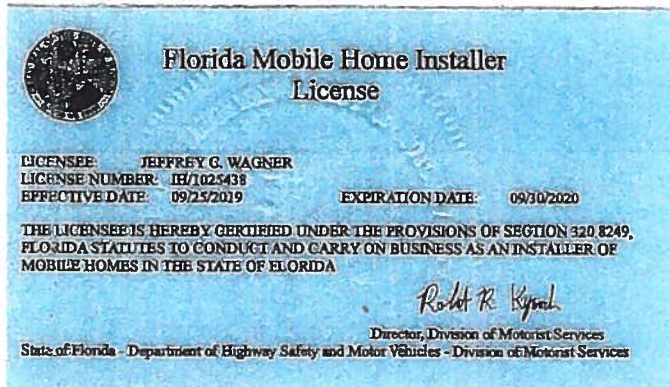


38603



Contractor changed 10/14 MG

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 38603 CONTRACTOR JEFFREY C. WAGNER PHONE 813-659-0615

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Change Mechanical Contractor

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 _____ Signature _____ License #: _____ Phone #: _____ Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C <i>02228</i>	Print Name <u>ALAMERICAN AIR CONDITIONING</u> Signature <u>Steve Chapman</u> License #: <u>CAC 57680</u> Phone #: <u>904-461-0070</u> Qualifier Form Attached <input checked="" type="checkbox"/>

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.

Thank you
813-659-0615

Need More

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1908-80 CONTRACTOR Jeff Wagner PHONE 813-659-0615

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 ✓ 1951	Print Name <u>Charles Santoni</u> ^{Electric Energy} Signature <u>Charles B. Santoni</u> License # <u>EC0000075</u> Phone # <u>813-932-7146</u> Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C <u>B</u> 2037 ✓ Products Subsidiary etc	Print Name <u>James Brown</u> Signature <u>JB</u> License # <u>CM01818075</u> Phone # _____ Qualifier Form Attached <input checked="" type="checkbox"/>

~~Replace with AI American Air Conditioning~~

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

386-758-1008

Source: Need a place CO. FLA. Mom

Licensee Details**Licensee Information**

Name: **CHAPMAN, STEPHEN RANDALL (Primary Name)**
ALL AMERICAN AIR CONDITIONING & HEATING
CONTRACTORS INC (DBA Name)

Main Address: **1010 STATE ROAD 312**
ST AUGUSTINE Florida 32084

County: **ST. JOHNS**

License Mailing:

LicenseLocation: **1010 ST RD 312**
ST AUGUSTINE FL 32084

County: **ST. JOHNS**

License Information

License Type: **Certified Air Conditioning Contractor**

Rank: **Cert Air**

License Number: **CAC057680**

Status: **Current,Active**

Licensure Date: **06/03/1998**

Expires: **08/31/2020**

Special Qualifications **Qualification Effective**

Class B

Construction Business **02/20/2004**

Alternate Names

[View Related License Information](#)

[View License Complaint](#)

2601 Blair Stone Road, Tallahassee FL 32399 :: Email: **Customer Contact Center** :: Customer Contact Center: 850.487.1395

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