SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 53786 JOB NAME Lake City Medical Center - Ancillary Building Addition

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.

		Need
ELECTRICAL ☐ CC#_____	Print Name James Brian Seay Signature DocuSigned by: James Brian Seay BCB6A64EBBE148D... Company Name: Miller Electric Company Total: $1,437,754 License #: EC 13003061 Phone #: 904-509-9289	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
MECHANICAL/ A/C ☐ CC#_____	Print Name Thomas Wade Smith Signature DocuSigned by: Thomas Wade Smith 08923C7366E14CE... Company Name: WW Gay Mechanical Contractor, Inc. Total: $898,673 License #: CMC1249841 Phone #: 904-388-2696	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
PLUMBING/ GAS ☐ CC#_____	Print Name Thomas Wade Smith Signature DocuSigned by: Thomas Wade Smith 08923C7366E14CE... Company Name: WW Gay Mechanical Contractor, Inc. Total: $400,315 License #: CFC1425962 Phone #: 904-388-2696	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
ROOFING ☐ CC#_____	Print Name Joni Wilford Signature Company Name: Scherer Construction of North Florida LLC License #: CCC1327794 Phone #: 352-371-1417	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SHEET METAL ☐ CC#_____	Print Name N/A Signature Company Name: License #: Phone #:	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
FIRE SYSTEM/ SPRINKLER ☐ CC#_____	Print Name Richard Bloom Signature Company Name: WW Gay Fire & Integrated Systems License#: 421788-0001-2001 Phone #: 352-258-5521	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
SOLAR ☐ CC#_____	Print Name N/A Signature Company Name: License #: Phone #:	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE
STATE SPECIALTY ☐ CC#_____	Print Name N/A Signature Company Name: License #: Phone #:	☐ Lic ☐ Liab ☐ W/C ☐ EX ☐ DE

Ref: F.S. 440.103; ORD. 2016-30