

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR _____

PHONE

30034

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 _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS <i>728</i>	Print Name <i>Plumbing Concepts, Inc.</i> License #: <i>CFC 1427326</i>	Signature <i>[Signature]</i> Phone #: <i>386-288-5111</i>
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	Trade Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.109 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.

STRUCTURAL STEEL OBSERVATIONS DISPATCH REPORT

Terracon

Client

Stephens & Barrios

Project

Family Dollar, Ft. White, FL
7270-7350 Southwest U.S. Highway 27
Ft. White, FL 32038

Authorized: Joe Cappuccio

Keymap:

Jobsite: 7270-7350 Southwest U.S. Highway 27

Service Date: 05/21/12

Time: 0900

Contractor: Pioneer Construction Services

Project Manager: Denis, Worthington

Task:

Project Number: EQ121028

Report Number: EQ121028.0011

Requested Date: 05/18/12

Time: 0900

SERVICES REQUESTED BY:

Pioneer Construction Services
(first name, last name, and company name)

OBSERVATION LOCATION(S):

A to D, 1 to 6, Roof level

TYPE OF WELDED CONNECTIONS:

☐ Moment

☐ Fillet

☐ Groove

☐ Puddle

☐ Other:

NA

TYPE OF OBSERVATION:

☐ Visual

☐ Other:

NA

OBSERVATION RESULTS:

☐ Based on our observations, the connections observed at the referenced locations appeared to be the proper size, type, in the proper location and placed in general accordance with the identified project drawings.

☐ Based on our observations, the connections observed at the referenced locations appeared to be the proper size, type, in the proper location and placed in general accordance with the identified project drawings **EXCEPT** as noted. The noted exceptions are documented as Non-Conforming.

☐ Based on our observations, the connections observed today **DID NOT APPEAR** to be placed in general accordance with the identified project drawings. As a result, the observation is noted at Non-Conforming.

REFERENCED DRAWINGS:

SL01

EXCEPTIONS:

none

COMMENTS:

OBSERVATIONS REPORTED TO:

(first name, last name, and company name)

Comments:

Bill Code

Units

Rate

Technician:

Client Rep: Carlos Barrios

Reported To: w/

Mileage: Start Time:

Services:

Reviewed By:

Stop Time:

Lunch / Non-Chargeable: