



Alachua County  
Department of Growth Management  
10 SW 2<sup>nd</sup> Ave., Gainesville, Fl 32601  
<http://growth-management.alachuacounty.us>

Submit Application to: **Building Division**  
building@alachuacounty.us  
Tel. 352.374.5243  
Fax. 352.491.4510

### SUBCONTRACTOR VERIFICATION

**PERMIT NUMBER** \_\_\_\_\_ **SUBMITTED BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

Alachua County issues combination permits where one permit covers all trades doing work at one site. It is necessary that we have documentation of the subcontractors who actually did the trade specific work under the general contractor's permit. It shall be the responsibility of the general contractor to make sure that the subcontractors are licensed with the Alachua County Building Department.

Before an inspection can be scheduled, this form shall be submitted to the Office of Codes Enforcement.

**General Contractor:** \_\_\_\_\_  
SIGNATURE

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #

**Electric Contractor:**

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #

**HVAC Contractor:**

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #

**Plumbing Contractor:**

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #

**Roofing Contractor:**

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #

**Gas Contractor:**       LP     Natural

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
COMPANY NAME - PLEASE PRINT COUNTY/STATE LICENSE # PHONE #