

CITY OF GAINESVILLE
BUILDING CONTRACTOR SUBLIST FOR ONE & TWO FAMILY DWELLINGS

PROJECT ADDRESS _____

PERMIT NUMBER _____

BUILDERS STATE LICENSE NUMBER _____

BUILDING CONTRACTOR _____

SUBCONTRACTOR INFORMATION

ELECTRICAL CONTRACTOR _____

ADDRESS _____ PHONE # _____

STATE LICENSE # _____ DATE _____

PLUMBING CONTRACTOR _____

ADDRESS _____ PHONE # _____

STATE LICENSE # _____ DATE _____

H.V.A.C. CONTRACTOR _____

ADDRESS _____ PHONE # _____

STATE LICENSE # _____ DATE _____

GAS CONTRACTOR _____

ADDRESS _____ PHONE # _____

STATE LICENSE _____ DATE _____

NOTARY

THE ABOVE BUILDING CONTRACTOR CERTIFIES THAT THIS SUBCONTRACTOR LIST ACCURATELY
REFLECTS THE LICENSED INDIVIDUALS WORKING ON THIS NEW DWELLING

SIGNATURE OF BUILDING CONTRACTOR

THE BUILDING CONTRACTOR HAS ACKNOWLEDGED THIS BEFORE ME THIS ____ DA OF _____, 20 ____.
HE/SHE/THEY PROVIDED _____
AS IDENTIFICATION AND HE/SHE/THEY PROVIDED _____ AS IDENTIFICATION AND
HE/SHE/THEY DID TAKE AN OATH.

SIGNATURE OF NOTARY

PRINTED NAME OF NOTARY

TITLE

COMMISSION #