



# Sub-Contractor Verification List

City of Dunedin, Florida

Planning & Development

737 Loudon Avenue

Dunedin, FL 34698

727-298-3210

[WWW.DUNEDINGOV.COM](http://WWW.DUNEDINGOV.COM)

*For Office Use*

Application #: \_\_\_\_\_ - \_\_\_\_\_

Permit #: \_\_\_\_\_ - \_\_\_\_\_

Change Order #: \_\_\_\_\_

Project Address: \_\_\_\_\_

*The primary contractor shall submit this form with all applicable sub-contractors listed prior to the issuance of the building permit. This permit may be used in lieu of sub-contractors submitting individual permit affidavits for the same project.*

<b>MECHANICAL CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____
<b>ELECTRICAL CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____
<b>PLUMBING CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____
<b>GAS CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____
<b>ROOFING CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____
<b>SPECIALTY/OTHER CONTRACTOR:</b> Company Name: _____ Address: _____ Telephone #: _____ Email: _____ Qualifier Printed Name: _____		State License #: _____ PCCLB License #: _____ Dunedin Registration #: _____ X _____ Signature of License Holder _____ or Authorized Agent _____

**STATEMENT OF PRIMARY CONTRACTOR:**

I hereby certify that the above signatures are of the license holder or the authorized agent of the sub-contractors who will be performing work on the project referenced above, of which I am the primary contractor. I understand that any change of sub-contractor shall be permissible provided advanced written notification is first submitted to and approved by the Building Official.

\_\_\_\_\_  
Signature of Primary Contractor or Authorized Agent      \_\_\_\_\_ Date      \_\_\_\_\_ State License #      \_\_\_\_\_ PCCLB #      \_\_\_\_\_ Dunedin #

State of Florida  
County of Pinellas

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is (\_\_\_\_) personally known to me or (\_\_\_\_) has produced \_\_\_\_\_ as identification.

Signature of Notary Public: \_\_\_\_\_ (SEAL)