



**SUBCONTRACTOR LIST**  
 City of Dunedin, Florida ♦ Community Development Department  
 737 Loudon Avenue ♦ Dunedin, FL 34698 ♦ 727-298-3210 ♦ [www.dunedingov.com](http://www.dunedingov.com)

**Permit Application #:** \_\_\_\_\_ **Project Address:** \_\_\_\_\_

*The primary contractor shall submit this form with all applicable subcontractors listed prior to the issuance of the building permit.*

**ELECTRICAL CONTRACTOR**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**GAS CONTRACTOR**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**MECHANICAL CONTRACTOR**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**PLUMBING CONTRACTOR**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**ROOFING CONTRACTOR:**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**SPECIALTY / OTHER CONTRACTOR:**

Company Name: \_\_\_\_\_ State License No.: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ PCCLB License No.: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Dunedin Registration No.: \_\_\_\_\_  
 License Holder: \_\_\_\_\_ Email: \_\_\_\_\_

**STATEMENT OF PRIMARY CONTRACTOR**

I hereby state that the above subcontractors will be performing work on the project referenced above, of which I am the primary contractor. I understand that any change of subcontractor shall be permissible provided advanced written notification is first submitted to and approved by the Building Official.

**PRIMARY CONTRACTOR**

Company Name: \_\_\_\_\_  
 Company Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
 License Holder: \_\_\_\_\_

Signature:\*\* \_\_\_\_\_ Date: \_\_\_\_\_

*\*\*Signature of license holder or authorized agent.*