

City of Live Oak Building Department 416 Howard St. E

Live Oak, FL 32064

Office (386) 362-2009 Fax: (386) 362-4305

CONTRACTORS ADDENDUM TO BUILDING PERMIT

| Building Permit No | Date: |
|--|-------------|
| Owner(s) Name(s): | |
| 911 Address: | |
| Parcel ID number: | |
| I hereby certify that the following subcontractors will be used on the above referenced job. They are aware that they are responsible for obtaining their own permits for this job and providing Florida State Product Approval Forms where applicable. | |
| CONTRACTOR | LICENSE NO. |
| ELECTRICAL: | |
| SIGNATURE: | |
| PLUMBING: | |
| SIGNATURE: | |
| MECHANICAL: | |
| SIGNATURE: | |
| ROOFING: | |
| SIGNATURE: | |
| ALARM SYSTEM: | |
| SIGNATURE: | |
| | |
| Subcontractors <u>must sign before</u> a permit can be issued and before commencing work on the job. | |
| Contractor | License No. |