



SUB-CONTRACTOR CONFIRMATION FORM

201 Central Ave W
Lake Wales, FL 33853
863-676-5115
permitting@lakewalesfl.gov

Permit #: _____ Primary Contractor Company: _____

Job Site Address: _____

The qualifier of each major sub-trade (electrical, irrigation, plumbing, mechanical, roofing, pool) performing work under a general contractor must complete this form and submit it to the Lake Wales Building Division before the permit is issued or with a revision form. This form must be notarized, and an copy must be submitted.

*Replacing current sub-contractor? Yes

*Add sub-contractor? Yes

Sub-Contractors Information:

Company Name: _____

Qualifier Name: _____

Address : _____

License #: _____

Phone # and email address: _____

Qualifier's Affidavit:

I, _____ do hereby certify that my company is responsible for the (circle one) **Electrical, Mechanical, Plumbing, Roofing, Irrigation or Pool** on the above mentioned permit.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Print Name of Licensed Contractor

Signature of Licensed Contractor

State of _____ County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me, or has produced _____ as identification, by means of physical presence or online notarization.

Signature, Notary Public – State of Florida

Printed, Typed, or Stamped Name of Notary

Submit this form along with the permit application/revision form to Permitting@lakewalesfl.gov