

SUBCONTRACTOR AFFIRMATION:

To be completed by the Qualifier working under the General Contractor, or by Owner-Builder, as defined by Florida Statutes.

Permit Number: _____

Form Completed By: Qualifier Owner-Builder

General Contractor for Project: _____

Check one:

- | | |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Septic |
| <input type="checkbox"/> Mechanical | <input type="checkbox"/> Other _____ |

Jobsite Address: _____

<p>TO BE COMPLETED BY QUALIFIER</p> <p>Qualifier's Name: _____</p> <p>Company Name: _____</p> <p>State License #: _____</p>
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Phone: _____

Email: _____

ACKNOWLEDGEMENT

Knowingly providing false information to obtain a permit to practice construction contracting is a violation of Florida Statute 489.129 and 489.533.

(Signature of Qualifier under General Contractor or Owner-Builder)

(Print name of Qualifier under General Contractor or Owner-Builder)

STATE OF _____ COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____ (name of person) who ____ is personally known to me, or who ____ has produced identification (type of identification): _____.

Notary Signature: _____

Seal:

Email: PermittingPlanReview@colliergov.net; Fax: (239) 252-2334

Note: All Subcontractor Affirmation Form versions will be accepted until December 31, 2017. This form will be required as of January 1, 2018.