

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT
SUB-CONTRACTOR AGREEMENT/AFFIDAVIT**

***Note: Roof coverings other than shingles require licensed roofing contractor.**

Indian River County Contractor Certificate Number: _____

State of Florida Certification Number (if applicable): _____

Combination Permit Number : _____

_____ has agreed to be the subcontractor (type of construction trade indicated below)
(company/individual name)

- | | | | |
|------------------------------------|-------------------------------------|--|--|
| <input type="checkbox"/> concrete | <input type="checkbox"/> stucco | <input type="checkbox"/> electric | <input type="checkbox"/> aluminum (in-fill only) |
| <input type="checkbox"/> masonry | <input type="checkbox"/> insulation | <input type="checkbox"/> mechanical | <input type="checkbox"/> garage door |
| <input type="checkbox"/> carpentry | <input type="checkbox"/> roofing* | <input type="checkbox"/> irrigation | <input type="checkbox"/> fuel gas/propane |
| <input type="checkbox"/> drywall | <input type="checkbox"/> plumbing | <input type="checkbox"/> burglar alarm/low voltage | |

for _____ for the project located at _____.
(Name of prime contractor) (street address)

It is understood that, if there is any change of status regarding our participation with the above mentioned project. I will immediately advise the Indian River County Building Department by personally filing a Change of Contractor.

BUSINESS QUALIFIER (original signatures required):

Signature Printed Name Date

NOTARY AS TO CONTRACTOR: {CANNOT BE OLDER THAN 30 DAYS}

State of _____
County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____
by _____ who is _____ personally known or who has _____ produced
identification. Type identification produced: _____.

Official Signature of Notary Public

Notary's Name, Typed, Printed or Stamped

Notary Seal: