



CITY OF OKEECHOBEE
SUB-CONTRACTOR INFORMATION SHEET
 Tel: 863-763-9821 Fax: 863-763-1686
permit@cityofokeechobee.com

Permit Number	
Project Name	
Job Address	

The above named licensed contractor intends to use the following sub-contractor(s) on this project.

Plumbing Contractor

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Mechanical Contractor

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Electrical Contractor

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Roofing Contractor

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Irrigation Contractor

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Other

Company Name		
License Holder Name		License #
Contractor Signature		Date: _____ Telephone #

Note: If your chosen subcontractor(s) DO NOT have their current information (such as their business license, competency license, workmen's compensation, etc) in our files then we are unable to issue a permit for said subcontractor. Please verify their information. All contractors must be registered with the County of Okeechobee. All contractors not holding a state license must obtain a City Business License.

I understand it is my obligation to give timely notification of any change to the building department.

Primary Contractor Signature

Date