



Community Development Department

Building Construction Division

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BuildingConstruction@CharlotteCountyFL.gov
CharlotteCountyFL.gov

For Office Use Only

Permit Number _____
20 _____
Application Date _____
CSR Initials _____

Subcontractor Worksheet

This form is to be submitted at the time of Permit Application and must be completed with all information.
Changes in subcontractors are allowed by submitting a Change in Subcontractor form.

Permit Application Number _____

Address:

Number & Street _____ Type:(St., Dr., Pkwy., Blvd., etc.) _____ City _____ State _____ Zip _____

Parcel ID: _____ Building #: _____ Unit #: _____

Contractor/Owner Builder Name: _____ Contractor's Certification or Registration No. _____

Trade	Subcontractor Company Name	Subcontractor Telephone No.	Subcontractor License No.
A/C and Heating			
Electric			
Plumbing			
Roofing			
Gas			
Other: _____			

Contractor/Owner Builder Signature: _____ Date: _____

Print Name: _____

A recorded Notice of Commencement is required in the Permitting Office prior to the first inspection.