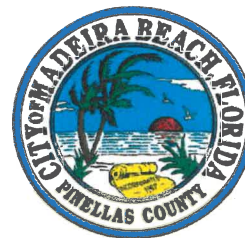




CITY OF MADEIRA BEACH
 300 MUNICIPAL DRIVE ▪ MADEIRA BEACH, FLORIDA 33708
 PHONE (727) 391-9951 ▪ FAX (727) 395-9361
www.madeirabeachfl.gov



SUBCONTRACTOR JOB CARD

This form MUST be complete and signed by a City-registered license holder or authorized buyer.

Permit #: _____

Job Address: _____

Contractor/Subcontractor Name: _____

Company Name: _____

Office Phone: _____ Cell Phone: _____

Email Address: _____ Fax: _____

State License #: _____ PCCLB License # _____

PLEASE SUBMIT JOB CARD FOR EACH APPLICABLE TRADE

- Building* *Electrical* *Plumbing* *Gas* *Mechanical* *Fire Alarm*
- Roof* *Underground Utilities* *Fire Sprinkler* *Fire Suppression/Hood* *Low Voltage*
- Other*

Scope of Work _____

Print Name (License holder or authorized agent) **Signature** **Date**

Mail, email, or fax this form to:

City of Madeira Beach Building Department
300 Municipal Drive
Madeira Beach, FL 33708
Attn: Patty Kordis

Fax: (727) 399-1131 or **Email:** pkordis@madeirabeachfl.gov

*****FOR OFFICE USE ONLY*****

Staff Comments (If applicable):
