



**Chatham County Department of Building**  
**Safety & Regulatory Services**  
P.O. Box 8161, Savannah, GA 31412-8161  
912-201-4300 - Fax 912-201-4301



**Gregori S. Anderson, CBO**  
**Director**

**Clifford Bascombe, CBO, CFM**  
**Assistant Director**

**SUBCONTRACTOR AGREEMENT**

Job Location \_\_\_\_\_

General Contractor \_\_\_\_\_

Permit # \_\_\_\_\_

**PLUMBING**

Date \_\_\_\_\_

I hereby certify that I will perform the plumbing work for the project described above and I further certify that I have a valid Georgia State license and Local Business License.

Local Business License # \_\_\_\_\_ Jurisdiction \_\_\_\_\_

State License # \_\_\_\_\_ Expires: \_\_\_\_\_

Company Name \_\_\_\_\_

Signature \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

**ELECTRICAL**

Date \_\_\_\_\_

I hereby certify that I will perform the electrical work for the project described above and I further certify that I have a valid Georgia State license and Local Business License.

Local Business License # \_\_\_\_\_ Jurisdiction \_\_\_\_\_

State License # \_\_\_\_\_ Expires: \_\_\_\_\_

Company Name \_\_\_\_\_

Signature \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

**MECHANICAL**

Date \_\_\_\_\_

I hereby certify that I will perform the mechanical work for the project described above and I further certify that I have a valid Georgia State license and Local Business License.

Local Business License # \_\_\_\_\_ Jurisdiction \_\_\_\_\_

State License # \_\_\_\_\_ Expires: \_\_\_\_\_

Company Name \_\_\_\_\_

Signature \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_