



City of Wheeling - Building Permit Application
Division of Building Code Services
Phone: 304-234-3601

Subcontractor List Supplement

Work Location: _____

General Contractor: _____

Provide detailed list of Subcontractors identified as "OTHER" on Building Permit Application.

SUBCONTRACTOR INFORMATION	Subcontract Value	Subcontractor Name, Address, City, ST, Zip Code	WV Lic	City Lic
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

TOTAL VALUE: **This total MUST equal the Contract Value of "OTHER" on Permit Application.**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to this permit.

Applicant Name: _____

Applicant Signature: _____ Building Insp Approval: _____