



| For Staff Use Only | | |
|--------------------|--------------------------------|----------------|
| Date Received | Date Released: Released to: | Staff Initial: |

City of Thousand Oaks Sub-Contractor List

All owners, builder and general contractors must complete this form and submit it to Customer Service to receive final inspection and utility clearances. No final inspections or utility clearances will be given until all sub-contractors have purchased a City of Thousand Oaks Business Tax Certificate (Business License) for the time they worked on this project. Contact Customer Service at (805) 449-2201 or fax completed list to (805) 449-2289.

Type of building (check one): Commercial Building or Residence Bldg. Permit #: _____

If Commercial, was square footage added to an existing building? Yes or No What is the tenant name? _____

Address of Project: _____ Suite #: _____

Contractor/Owner Builder Name: (Please Print): _____ Phone #: _____

Contractor/Owner Builder Signature: _____ Fax #: _____

The following companies performed work/furnished materials/provided services for the above job.

| Type of Work | Business License # | Name of Company | Address | Contractor State License # | Phone # | Date work Began | Date Work Done |
|---------------------------------|--------------------|-----------------|---------|----------------------------|---------|-----------------|----------------|
| General A 1 or B | | | | | | | |
| Framing | | | | | | | |
| Plumbing | | | | | | | |
| Electrical | | | | | | | |
| Plastering | | | | | | | |
| Sewer | | | | | | | |
| Auto Fire Ext. System | | | | | | | |
| Heating Vents/A C | | | | | | | |
| Cement/Concrete | | | | | | | |
| Excavating/Trench. | | | | | | | |
| Lath/Drywall | | | | | | | |
| Cabinets | | | | | | | |
| Magnesite or similar Substances | | | | | | | |
| Tile/Ceramic/Mosaic | | | | | | | |
| Steel | | | | | | | |
| Hardwood Floors | | | | | | | |
| Carpeting | | | | | | | |
| Roofing | | | | | | | |
| Ornamental Metal | | | | | | | |

| Type of Work | Business License # | Name of Company | Address | Contractor State License # | Phone # | Date work Began | Date Work Done |
|--|--------------------|-----------------|---------|----------------------------|---------|-----------------|----------------|
| Concrete Block, Masonry, Brick | | | | | | | |
| Sheet Metal | | | | | | | |
| Glazing | | | | | | | |
| Fencing-not block walls | | | | | | | |
| Paving/Surfacing & Grading | | | | | | | |
| Insulation | | | | | | | |
| Refrigeration | | | | | | | |
| Landscaping | | | | | | | |
| Signs | | | | | | | |
| Misc. Classified Specialist | | | | | | | |
| Painting/Decorating | | | | | | | |
| DELIVERIES DO NOT INCLUDE DELIVERIES FROM COMMON CARRIERS | | | | | | | |
| Drywall | | | | | | | |
| Floor Coverings | | | | | | | |
| Shower Doors | | | | | | | |
| Garage Doors | | | | | | | |
| Glass | | | | | | | |
| Hardware | | | | | | | |
| Doors, windows, frames | | | | | | | |
| Roofing Materials | | | | | | | |
| Rock/sand/concrete | | | | | | | |
| Masonry/brick/block | | | | | | | |
| Carpets, drapes | | | | | | | |
| Plumbing | | | | | | | |
| Appliances | | | | | | | |
| Lumber | | | | | | | |
| Stucco | | | | | | | |
| Insulation | | | | | | | |
| Misc. Items | | | | | | | |