



# City of Coachella

53990 Enterprise way | Coachella, CA 92236 760.398.3502 | www.Coachella.org

## SUBCONTRACTOR LIST

### BUSINESS LICENSE VERIFICATION & REQUEST FOR FINAL INSPECTION

\*\*\* FINAL INSPECTIONS NOT GIVEN UNTIL ALL CONTRACTORS HAVE A CURRENT BUSINESS LICENSE \*\*\*

EMAIL COMPLETED APPLICATION TO THE BUILDING DEPARTMENT TO FINAL INSPECTION ▪ [RVasquez@coachella.org](mailto:RVasquez@coachella.org)

CONSTRUCTION ADDRESS		PERMIT NUMBER	CITY INSPECTOR'S NAME	
STREET:			FIRST:	
			LAST:	

PROPERTY OWNER'S NAME:		FIRST:	LAST:	
ADDRESS:		EMAIL:		PHONE:

GENERAL CONTRACTOR'S NAME OR CO.:		FIRST:	LAST:	
ADDRESS:		EMAIL:		PHONE:

STATE CONTRACTORS LICENSE No.:	JOB VALUE:	COACHELLA BUSINESS LICENSE No.:
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**\* ALL SUBCONTRACTORS LISTED BELOW ARE REQUIRED TO HAVE A COACHELLA CITY BUSINESS LICENSE FOR FINAL INSPECTION.**

SUBCONTRACTOR	*R.C. BUS. LIC. #	STATE LIC. #	NAME	ADDRESS	PROJECT DATES
GENERAL CONTRACTOR			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
PLUMBING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
ELECTRICAL			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
HEATING/AC			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
CABINET			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
CONCRETE			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
CLEAN-UP			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
DRYWALL			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
FENCING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
FLOORING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
FRAMING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
GLAZING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
GRADING/PAVING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
INSULATION			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
LANDSCAPING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
LATHING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
MASONRY			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:



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SUBCONTRACTOR	*R.C. BUS. LIC. #	STATE LIC. #	NAME	ADDRESS	PROJECT DATE
OM. METALS			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
PAINTING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
PLASTERING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
ROOFING			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
SANITATION SYS.			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
STEEL REINF.			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
SHEET METALS			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
SWIMMING POOLS			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:
TILE/STONE			FIRST:	STREET:	START DATE:
			LAST:	CITY, ZIP:	END DATE:

I CERTIFY THAT THE ABOVE NAMED SUBCONTRACTORS WERE EMPLOYED DURING THE COURSE OF CONSTRUCTION.		
TITLE:	SIGNED BY:	DATE:

BUILDING DEPARTMENT DIVISION ONLY		
TITLE:	SIGNED BY:	DATE:

Please email this form to the Building Dept.  
[RVasquez@coachella.org](mailto:RVasquez@coachella.org)