Contractor/Owner-Builder:

y Hall 1400 Highland Avenue

Manhattan Beach, CA 90266-4795

Email: revenue@citymb.info

Phone (310) 802-5558x2 FAX (310) 802-5551

SUB-CONTRACTOR LIST

Manhattan Beach Business License #: BL-

| TO: | CONTRACTORS/ SUB- | ·CONTRACTORS/ | OWNER BUILDERS |
|-----|-------------------|---------------|----------------|
| | | | |

FROM: Business License Division

SUBJECT: Sub-Contractor Lists

The following Sub-Contractor list must be completely filled out prior to submitting the list to the Business License Division. The Sub-Contractor list will take **up to 5 days** to complete upon submittal. Incomplete Sub-Contractor lists may take longer to be processed by staff. A binder is conveniently located at the cashier counter with the names and current City of Manhattan Beach Business License Numbers of all City-licensed Contractors and Sub-Contractors.

- General Contractor/Owner-Builder shall require all Sub-Contractors to have a current Manhattan Beach Business License before permitting them to begin work for the duration of the job, per Manhattan Beach Municipal Code Section 6.01.300.
- Failure to do so may result in delay of final building inspection and the General Contractor/Owner-Builder may be held responsible for any unlicensed Sub-Contractors or Specialty Contractors.
- Final Approval for a Building Permit will not be given until this list of Contractors working on the project is completed and returned to the Business License Division by either the General Contractor or the Owner-Builder.
- All Contractors and Sub-Contractors working on the project must have a City of Manhattan Beach Business License for the dates during which they worked on the project.

| Job Address: | Building Permit #: - | |
|---------------------|----------------------|-------|
| Email Address: | Phone #: () - | |
| | RECEIVED BY: | DATE: |
| FOR OFFICE USE ONLY | RECEIVED B1. | DATE. |
| TOR OTTICE ESE ONE! | | |

| SUBCONTRACTOR NAME | Address and Phone Number | Date Work Started (Mo/Yr) | Date Work Ended (Mo/Yr) | M.B. Business License # |
|--------------------|--------------------------|---------------------------|-------------------------|-------------------------------|
| BRICK/BLOCK: | | / | / | BL- |
| CABINET WORK: | | / | / | BL- |
| CLEAN-UP/HAULING: | | / | / | BL- |

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| CONCRETE: | / | / | BL- |
|---|---|---|-----|
| DESIGNER: | / | / | BL- |
| DEMOLITION: | / | / | BL- |
| DEPUTY INSPECTOR | / | / | BL- |
| DRYWALL: | / | / | BL- |
| ELECTRICAL: | / | / | BL- |
| ELEVATORS: | / | / | BL- |
| ENGINEER (ON-SITE STRUCTURAL OBSERVATIONS): | / | / | BL- |
| EXCAVATION: | / | / | BL- |
| FENCING: | / | / | BL- |
| FIRE SPRINKLERS: | / | / | BL- |
| FLOORING: | / | / | BL- |
| FOUNDATION/SLAB: | / | / | BL- |
| FRAMING: | / | / | BL- |

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| CARACE DOOR. | <u> </u> | | 1 | |
|-----------------------|----------|---|---|-----|
| GARAGE DOOR: | | / | / | BL- |
| HVAC: | | / | / | BL- |
| INSULATION: | | / | / | BL- |
| LANDSCAPE/SPRINKLERS: | | / | / | BL- |
| PAINTING: | | / | / | BL- |
| PLASTERING: | | / | / | BL- |
| PLUMBING: | | / | / | BL- |
| ROOFING: | | / | / | BL- |
| SCAFFOLDING: | | / | / | BL- |
| SEWER: | | / | / | BL- |
| SHEET METAL: | | / | / | BL- |
| SIDING: | | / | / | BL- |
| SIGNS: | | / | / | BL- |
| STRUCTURAL STEEL: | | / | / | BL- |
| | | | | |

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| STUCCO/SIDING. | | | | |
|---------------------|---|----------|---|-----|
| STUCCO/SIDING: | | / | / | BL- |
| | | | | |
| SURVEYOR: | | | | |
| | | <u>/</u> | / | BL- |
| | | <u>-</u> | , | |
| SWIMMING POOL: | | | | |
| | | / | / | BL- |
| | | | | |
| TEMPORARY POWER | | | | |
| POLE: | | / | / | BL- |
| | | | | |
| | | | | |
| TILE/MARBLE: | | / | / | BL- |
| | | , | , | DL. |
| THE PARKS | | | | |
| WELDING: | | / | / | BL- |
| | | , | , | |
| WINDOWS | | | | |
| WINDOWS: | | / | / | BL- |
| | | | | |
| LIST ANY OTHER SUB- | | | | |
| CONTRACTORS OR | | / | / | BL- |
| SERVICES NOT LISTED | | | | |
| ABOVE: | | | | |
| | | / | / | BL- |
| | | | | |
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| FOR OFFICE USE ONLY | OUTSTANDING LICENSES: | APPROVED: | DATE: |
|---------------------|-----------------------|-----------|-------|
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