

Permit No.

CONTRACTOR/SPECIALTY CONTRACTORS

Zone	Sec.	Plat	Parcel	Lot No.
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Under the provisions of Chapter 444, Section 444-9.1, I hereby acknowledge that my license is in full force and effect. Listed below are the names and licenses of all the specialty contractors involved in the project and I further acknowledge that their licenses are in full force and effect.

Signature of Contractor

Date

SPECIALTY CONTRACTORS:

Name

License

Name	License

Licensed as a specialty contractor under the provisions of Chapter 444, H.R.S.

My license number is _____ and it is in full force and effect.

Signature of Contractor

Date

Address

Telephone

Licensed as a specialty contractor under the provisions of Chapter 444, H.R.S.

My license number is _____ and it is in full force and effect.

Signature of Contractor

Date

Address

Telephone

Licensed as a specialty contractor under the provisions of Chapter 444, H.R.S.

My license number is _____ and it is in full force and effect.

Signature of Contractor

Date

Address

Telephone