

**FORM- 046**

**Subcontractor Verification Form**

- Submit this form prior to permit issuance and commencement of work, anytime subcontractors are added or replaced, [or at least five (5) working days prior to requesting a final building inspection.]
- General contractor/owner-builder shall require all sub-contractors to have a current Long Beach Business License before permitting subcontractors to begin work and for the duration of the job.
- Per Long Beach Municipal Code Section 18.04.070, failure to do so may result in the delay of the final building inspection, the issuance of a Stop Work Order; and revocation of any permit issued by the City; and permit applicant paying penalty.
- 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 Development Permit Center by either the general contractor or the owner-builder.
- Please refer to Information Bulletin 069 (IB-069), Contractor/Subcontractor Verification Requirements, for more guidance on completing this form. Submit the completed form to subcontractorlist@longbeach.gov

**Please retain a copy for your records.**

**PROJECT DETAILS**

List all building permit numbers and sub-trade separately:

Permit Type:  Residential  Commercial

Permit Number	Permit Number	Permit Number	Permit Number	Permit Number	Permit Number

Property Owner Name:

Job Address: \_\_\_\_\_ Long Beach CA  
Number Street Unit/Suite # City State Zip

General Contractor Name: \_\_\_\_\_ Check here if owner/builder

General Contractor Address: \_\_\_\_\_  
Number Street Unit/Suite # City State Zip

Subcontractors used?  Yes  No Type of Construction:  New  Remodel

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**ACKNOWLEDGEMENT AND CERTIFICATION**

As the general contractor for the subject permit, I understand that I am required to provide a complete list of all subcontractors with the supplemental information requested below within five (5) business days of each of the following events:

1. At the time of permit issuance before the start of work;
2. At the time any subcontractor are replaced; and
3. At the time any subcontractors are added to the job

I certify under penalty of law that I have personally examined and am familiar with the information in this document and that based on my knowledge, the information contained herein is true, accurate, and complete. I acknowledge there are significant penalties for knowingly submitting false and misleading information including, but not limited to, the imposition of monetary fines and imprisonment. I further acknowledge all subcontractors are required to maintain a valid contractors license, proper workers' compensation insurance, and maintain a valid City business license throughout the entirety of the project. I further acknowledge that failure to maintain current information with the City as required by LBMC Sec. 18.04.070 may result in one or more of the penalties described herein.

\_\_\_\_\_  
Print First Name and Last Name

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Subcontractor Details**

Enter the type of trade(s) utilized and complete all information for known subcontractors.

Trades	Contractor Name & Address	Contractor's Email & Telephone No.	State Contractor License Classification & No.	Exp. Date	City Business License No.	Exp. Date	Workers' Comp Policy No.	Exp. Date	Labor Violation Determinations <sup>1</sup> & Settlement Actions (Yes/No)	Healthcare Expenditures <sup>2</sup> (Yes/No)
<i>EXAMPLE</i> Concrete Drilling & Coring	JOHN DOE 1234 E. Port Dr. Long Beach, CA 90802	John.doecontract562.com 562-XXX-XXXX	123456789	01/31/2025	BU123456	01/31/2025	987654321	01/25/2025	NO	YES

<sup>1</sup> A DISCLOSURE OF ANY PENDING OR PREVIOUS ENFORCEMENT ACTIONS, PENALTIES PAID FOR STATE OR FEDERAL LABOR CODE VIOLATIONS, AND THE PENALTIES FOR NON-COMPLIANCE IN LAST 5 YEARS AND PENALTIES.

<sup>2</sup> A DISCLOSURE OF ANY ALLOCATIONS OF HEALTHCARE EXPENDITURES MADE TO OR ON BEHALF OF EACH CONSTRUCTION WORKER AND FOR THEIR CONTRACTORS AND SUBCONTRACTORS.

To request this information in an alternative format or to request a reasonable accommodation, please contact the Community Development Department at [longbeach.gov/lbcd](http://longbeach.gov/lbcd) and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.