

Mobile Home Subcontractor Verification Form

APPLICATION/PERMIT # _____

JOB NAME Amburn, Lynn

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

In Columbia County, one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid State License to Columbia County Building Department prior to permit issuance.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL

Printed Name: James D Williams Signature: [Signature]
Company Name: Affordable electrical services Owner
License #: EC 13007092 Phone #: 386-249-9310

MECHANICAL / A/C

Printed Name: Steven Mollman Signature: [Signature]
Company Name: Mollman Heating Air Owner
License #: CAC-1819696 Phone #: 352-339-6640

F.S. 440.103 Building permits; identification of minimum premium policy.--
Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that is has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Columbia County, Florida

Mobile Home Letter of Authorization from Property Owner

(Required for Mobile Home Placement Permits)

This form confirms that the property owner is aware of and consents to the mobile home permit application being submitted for their property.

PROPERTY INFORMATION

Property Address: 1744 SW Dairy St.
City/State/Zip: Lake City, FL 32055
Parcel ID #: 08-55-16-03490-008

OWNER INFORMATION

Owner Name(s): LYNN Amburn
Mailing Address: 11630 SW Dairy St.
City/State/Zip: Lake City, FL 32055
Phone Number: 813-695-7078
Email: _____

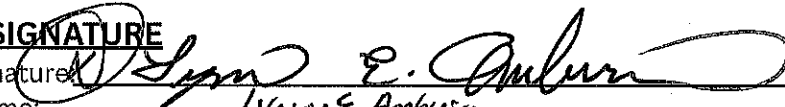
AUTHORIZED STATEMENT

I, the undersigned **property owner**, acknowledge that a **mobile home permit application** is being submitted for placement of a mobile home on the above-referenced property.

I confirm that I am **aware of this application** and hereby **consent to the placement of a mobile home** on my property in accordance with all applicable Columbia County regulations, the Florida Building Code, and any zoning or floodplain requirements.

I understand that as the property owner, I remain **responsible for ensuring full compliance** with all local and state requirements related to this mobile home placement.

OWNER SIGNATURE

Owner Signature: 
Printed Name: LYNN E Amburn
Date: 12-6-25

If property is Co-Owned, both owners must sign. A Landowner Affidavit may be required dependent upon who the home is placed for. This will be determined upon review.

Co-Owner Signature: _____
Printed Name: _____
Date: _____

NOTARY ACKNOWLEDGEMENT

State of Florida
County of Suwannee

The foregoing instrument was acknowledged before me this 6 day of Dec., 2025, by Lynn Amburn who is () personally known to me or (✓) has produced the following identification: D/CS

Notary Public

Notary Printed Name: TREEA A. Foster
Notary Signature: 