



COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

***Use to authorize property owners to pull permit on Installers behalf.**

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Jean Bramlett, give this authority for the job address show below
Installer License Holder Name

only, 316 SE Sharon Ln. Lake city, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person
Lindsey Cook	<i>Lindsey Cook</i>

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Jean Bramlett License Holders Signature (Notarized) IH138561 License Number 1/9/25 Date

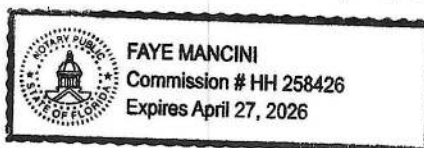
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Jean Bramlett, personally appeared before me and is known by me or has produced identification (type of I.D.) State ID on this 9 day of January, 2025.

Faye Mancini
 NOTARY'S SIGNATURE

(Seal/Stamp)





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 Phone: 386-758-1008 Fax: 386-758-2160

***Use to authorize Agent to pull permit on Installers behalf.**

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Jean Bramlett, give this authority and I do certify that the below
Installers Name
 referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Lindsey Cook	<i>Lindsey Cook</i>	Florida Permitting Solutions, LLC

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Jean Bramlett License Holders Signature (Notarized) JH1138561 License Number 1/9/25 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Jean Bramlett, personally appeared before me and is known by me or has produced identification (type of I.D.) State ID on this 9 day of January, 2025.

Faye Mancini
 NOTARY'S SIGNATURE

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