

COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

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

MOBILE HOME INSTALLER AGENT AUTHORIZATION

(BLANKET)

(Use if authorized to pull all permits on your behalf*)

I, Ronald Ryan Davis, give this authority, and I do certify that 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 Person Authorized	Signature of Person Authorized
1. Janet Johnston	1. Janet Johnston
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license. I understand that 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.

[Signature]
License Holder's Signature (Notarized)

3H1135009
License Number

5/5/20
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronald Ryan Davis, personally appeared before me and is ☒ known by me or ☐ has produced identification (type of ID) _____ on this 15 day of May, 2020.

(Seal/Stamp)

Carey F Chandler
Notary's Signature

Carey F Chandler
Notary's Printed Name



CAREY F. CHANDLER
Commission # HH 632453
Expires May 22, 2029

Published 10/2025

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MOBILE HOME INSTALLER LETTER OF AUTHORIZATION

(JOB SPECIFIC)

(*Use if only authorized for a specific address*)

I, _____, give this authority for the job address shown below ONLY,
(Installer License Holder's Name)
_____, and I do certify that the below referenced person(s)
(Job Site Address)
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 Person Authorized	Signature of Person Authorized
1. Janet Johnston	1. Janet Johnston
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license. I understand that 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.

License Holders Signature (Notarized) _____

License Number _____

Date _____

NOTARY INFORMATION:

STATE OF: _____ COUNTY OF: _____

The above license holder, whose name is _____ personally appeared before me and is (C) known by me or (C) has produced identification (type of I D.) _____ on this _____ day of _____, 20____.

(Seal/Stamp)

Notary's Signature _____

Notary's Printed Name _____

Published 10/2025

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MOBILE HOME INSTALLER LETTER OF AUTHORIZATION (JOB SPECIFIC)

(*Use if only authorized for a specific address*)

I, Ronald Ryan North, give this authority for the job address shown below ONLY,
136 NW Sunset Highway, and I do certify that 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 Person Authorized	Signature of Person Authorized
1. Janet Johnston	1. Janet Johnston
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license. I understand that 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.

License Holders Signature (Notarized)

1H1135009
License Number

7-16-2026
Date

NOTARY INFORMATION:

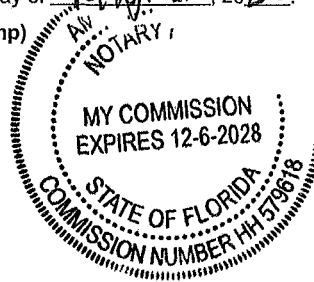
STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Ronald Ryan North, personally appeared before me and is (C) known by me or (C) has produced Identification (type of I.D.) FL ID on this 14 day of July, 2026.

Notary's Signature

Amanda Herbert
Notary's Printed Name

(Seal/Stamp)



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