

Blankenbaker

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR William Price PHONE 407-448-0957

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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 Certificate of Competency license in Columbia County.

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	<p>Print Name <u>Blaine W. Hittington</u></p> <p>License #: <u>EC13002957</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature <u>Blaine W. Hittington</u></p> <p>Phone #: <u>386 972 1700</u></p>
MECHANICAL/ A/C _____	<p>Print Name _____</p> <p>License #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature _____</p> <p>Phone #: _____</p>

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 it 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.

LIMITED POWER OF ATTORNEY

I, Glenn W. Whittington DO HEREBY AUTHORIZE Oda Price or Jodie Shepard

TO FULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

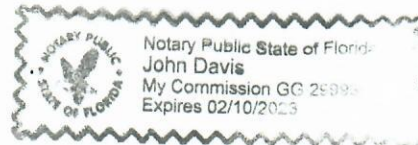
Glenn W. Whittington
SIGNATURE

4-24-21

DATE

Blankenbaker
parcel # 15-25-16-011615-005

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 20 DAY OF April 2021



John Davis

NOTARY PUBLIC

MY COMMISSION EXPIRES: 02/10/2023
COMMISSION NO. 66299936
PERSONALLY KNOWN: X
PRODUCED ID. (TYPE): _____



Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS LICENSING BOARD

THE ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

WHITTINGTON, GLENN
WHITTINGTON ELECTRIC INC
164 QUEENS COUNTRY RD
INTERLACHEN FL 32148

LICENSE NUMBER: EC13002957

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Blankenbaker

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR William Price PHONE 407-448-0953

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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 Certificate of Competency license in Columbia County.

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	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>
MECHANICAL/ WC _____	<p>Print Name <u>Ronald E Bonds SR</u> Signature <u>Ronald E Bonds SR</u></p> <p>License #: <u>CAC-1817658</u> Phone #: <u>850-769-1453</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>

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 it 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.



March 4, 2021

STATE OF FLORIDA

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding HVAC wiring permit (if necessary) for ANY install in the STATE OF FLORIDA, on behalf of Style Crest, Inc.

ODA PRICE
JESSIE SHEPARD

Blakenbaker
15-25-16-01615-005

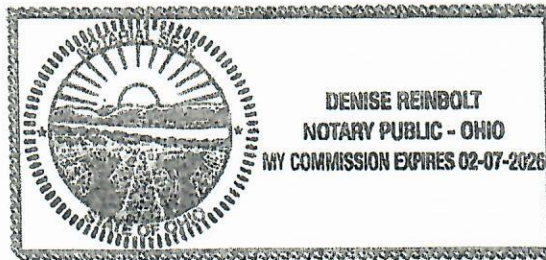
This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

Contractor's Signature

Sworn to and subscribed to before me this 4th day of March, 2021
By RONALD E BONDS, SR who is personally known to me or has produced _____
as identification and who did/did not take an oath.

Notary Public

My commission expires: 2-7-21





Ron DeSantis, Governor

Halsey Beshars, Secretary

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE CLASS B AIR CONDITIONING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

BONDS, RONALD EDWARD SR

STYLE CREST, INC.
2901 E 15TH ST
PANAMA CITY FL 32405

LICENSE NUMBER: CAC1817658

EXPIRATION DATE: AUGUST 31, 2022

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