

Columbia County Building Department 135 NE Hernando Ave, Suite B-21 Lake City, FL 32055 Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Expires August 9, 2029

Change of Subcontractor Request

Permit Information	DATE RECEIVED: APPROVED: DENIED.
• Permit #: 53845	COMPLETED CHANGE: YES
Property Owner: Tyler Brown	DATE PROCESSED:
Job Site Address: 542 NE Tammy Lane Lake City, FL	PROCESSED BY: NOTES:
AOT AO - (O)	
Original Subcontractor: ACE AC of Ocala	
• License #: CAC1817716	
New Subcontractor: Stylecrest	
• License #: CAC1817658	
Trade (i.e. Electrical, Plumbing, HVAC, etc.): HVAC	managata di di Managada (managada (m
Reason for Change:	
Owner wanted a different contarctor	
Owner wanted a uniterest contained	
 Required Documents: Subcontractor MUST be on file with our jurisdiction. If not, co 	emplete registration by making application @
https://www.columbiacountyfla.com/PermitSearch/MyBNZP	ortalLogin.aspx
New signed Subcontractor Form	
Hold Harmless Acknowledgement	
The undersigned agree to hold harmless and indemnify Columbi	a County and its agents from any claims or
liability resulting from this change of subcontractor.	
Signatures (All must be notarized)	
 Property Owner (If Owner-Builder) 	
Printed Name: Tyur Brown	Date: 10-25-25
Signature:	
State: Florda County: Baker	_
The foregoing instrument was acknowledged before me, by mea	ns of physical presence or online
notarization, this 25 day of Ocher, 2027, by	er Back , who is
personally known to me or has provided the following id	
Notary Printed Name: Boderck Distol	Notary Seal: BRODERICK D. PACK
Notary Signature:	* Commission # HH 662366
a Canaval Cookmatav	Expires August 9, 2029
General Contractor	Date: 1025,25
Printed Name: 19th Brown	Date:
Signature:	
State: Tolor 12/9 County: 64/64/	
The foregoing instrument was acknowledged before me, by mea	
notarization, this 25 day of Ochob , 2025, by personally known to me or has provided the following ident	, , , , , ,
Notary Printed Name: Broderck Pack	
	Notary Seal: BRODERICK D. PACK
Notary Signature:	* Commission#HH 662366 Created:
	Expires August 9, 2029 5/2025

Mobile Home Subcontractor Verification Form

APPLICATION/PERMIT # _	53845	JOB NAME	Brown

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.

			10000000000000000000000000000000000000
	Printed Name:	Signature:	
ELECTRICAL	Company Name:		Owner
	License #:	Phone #:	
eth district the		0 1	$\langle \cdot \rangle$
	Printed Name: Ronald	1300S Signature	e:
MECHANICAL / A/C Company N	Company Name: 514	2 Crest	Owner
	License #: CACL&17	Phone #	

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.



March 16, 2022

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.

Brody Pack

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

Contractor's Signature

Notary Public

My commission expires: 2-7-24

Denise Reinbolt
Notary Public, State of Ohio
My Commission Expires: