

## 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 INSTALLERS AGENT AUTHORIZATION		
I, ErneSt Scott Junson , 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
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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.		
License Holders Signature (Notarized)  TH 105749 2/2/22  License Number Date		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Alachuu		
The above license holder, whose name is <u>EVNUSH</u> <u>Scott Johnson</u> , personally appeared before me and is known by me or has produced identification (type of I.D.) on this <u>J</u> day of <u>February</u> , 20 <u>32</u> .		
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(Seal/Stamp)