

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 LETTER OF AUTHORIZATION

i, <u>Dale Houstor</u> Installer License Holder Na	me	•	=	ress show below	
only, <u>3827 SW B</u>	Job Address	Lake Col	Ly FI 3	1 I do certify that	
the below referenced person(s)	listed on this form	is/are under m	y direct superv	ision and control	
and is/are authorized to purcha	se permits, call for	inspections and	d sign on my b	ehalf.	
Printed Name of Authorized Person	Signature of Au Person	thorized	Authorized (Check one		
Song North	Song	aoren	Agent Propert	Officer y Owner	
· ·	, - 4		Agent Propert	Officer y Owner	
			Agent Propert	Officer y Owner	
I, the license holder, realize tha under my license and I am fully Local Ordinances.					
I understand that the State Lice holder for violations committed document and that I have full re	by him/her or by hi	is/her authorize	d person(s) thr	ough this	
License Holders Signature (Notarized) License Number License Number Date					
NOTARY INFORMATION: STATE OF: <u>Florida</u> COUNTY OF: <u>Columbia</u>					
The above license holder, whose name is Dale Houston, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 44bday of 0000 20 3					
Rinda Rith Craft NOTARY'S SIGNATURE (Seal/Stamp)					

(Seal/Stamp)

Notary Public State of Florida
Linda Ruth Craft
My Commission HH 041829
Expires 09/13/2024



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, Date Houston Installers Name	give this authority a	and I do certify that the below			
referenced person(s) listed on the	his form is/are under my direct su	pervision and control and			
is/are authorized to purchase pe	ermits, call for inspections and sig	n on my behalf.			
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name			
Song North	Some worth				
•					
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 (Note	arized) <u> </u>	33271 10/24/23 Imber Date			
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia					
The above license holder, whos personally appeared before me (type of I.D.)	and is known by me or has produ	ced identification of OCHOBER, 20 3			
Reside Ruth Craft NOTARY'S SIGNATURE (Seal/Stamp)					
		Notary Public State of Florida			

