

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR William Price PHONE _____

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	Print Name <u>Sandra Wilson</u> License #: <u>owner/builder</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Sandra Wilson by POA</u> Phone #: <u>386-292-0807</u>
MECHANICAL/ A/C _____	Print Name <u>Ronald Bonds</u> License #: <u>CAC 181765E</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Ronald Bonds by POA</u> Phone #: <u>800 259 3470</u>

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.

Price Rite Enterprise Inc.
"Where Quality Meets Value"
386-963-4298
Authorized Agent Form

I, Sandra Wilson, DO HERBY AUTHORIZE: Oda Price
Jessie Shepard OR Amy Johnson

TO PULL MY PERMITS AND ACT ON MY BEHALF AS MY AUTHORIZED
AGENT, IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME PERMIT.

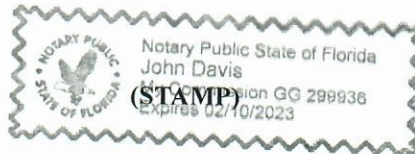
Sandra Wilson
SIGNATURE

7-12-22
DATE

314 SW Waters Court
Lake City FL 32024
parcel # 0745-16-02796-001

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 12th DAY OF March 2022

John Davis
NOTARY PUBLIC



John Davis
NOTARY PUBLIC PRINT

MY COMMISSION EXPIRES: 02/10/2023

COMMISSION NO: 26295536

PERSONALLY KNOWN: X

PRODUCED ID. (TYPE): _____



Ron DeSantis, Governor

Halsey Beshears, 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

Always verify licenses online at MyFloridaLicense.com

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