

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, Dale Houst	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
Sorry North	Somprose	
Song North Dylan Hinson	<u> </u>	
-		
under my license and I am fully Local Ordinances. I understand that the State Licenholder for violations committed I	t I am responsible for all permits presponsible for compliance with a nsing Board has the power and a by him/her or by his/her authorized sponsibility for compliance granters	all Florida Statutes, Codes, and uthority to discipline a license d person(s) through this
Dale Houston License Holders Signature (Note NOTARY INFORMATION:	arized) License No	
STATE OF: Florida	COUNTY OF: <u>Colum</u>	<u> अब</u>
The above license holder, whos personally appeared before me (type of I.D.)	e name is <u>Date Hous</u> and is <u>known by me</u> or has produ on this <u>Letter</u> day	iced identification of June , 20 23.
Rinda Ruth Crej NOTARY'S SIGNATURE		Seal/Stamp)

Notary Public State of Florida
Linda Ruth Craft
My Commission HH 941629
Expires 09/13/2024



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MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

Installer License Holder Name, give this authority for the job address show below				
only,NWT	amoka Ct take	Cutu, and I do certify that		
	listed on this form is/are under m	•		
	se permits, call for inspections and			
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)		
Sonya North	Song New	Agent Officer Property Owner		
Dylan Hinson	•	Agent Officer Property Owner		
_		Agent Officer Property Owner		
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 (Nota	arized)	3271 <u> </u>		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia				
The above license holder, whose name is				
Link Rith Cre NOTARY'S SIGNATURE	(S	eal/Stamp)		

Notary Public State of Florida
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