

## COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-2I, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

\*Use to authorize
Agent to pull
permit on Installers
behalf.

MOBILE HOL	ME INSTALLERS AGENT A	UTHORIZATIO	N	
1. Kusta L. Kingel	give this author	ity and I do cenif	y that the below	
referenced person(s) listed on t	his form is/are under my direc	t supervision and	control and	
ls/are authorized to purchase p	ANTERIOR DESIGNATION OF THE CONTROL			
Printed Name of Authorized Person	Signature of Authorized Person	Agents Co	mpany Name	
Song NOAL	Sono Nous			
**************************************		<del>., , l </del>		<b>-</b>
1, 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 wi	th all Florida Stat	utes, 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.				
/ .	¥ _ \$		:22	
1/1	IH	1038219	01/07/25 Date	
License Holders Signature (Note	arized) License	Number	Date	
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: Sawann	<u>ee</u>		
The above license holder, whose personally appeared before me	e name is Rusty LK, and is known by me or has pro	oduced identifica	tion	

(Seel/Stamp)

on this 744 day of January

BRENDA H. CARROLL
Commission # HH 185328
Expires November 20, 2025
Bonded Thru Troy Fain Insurance 800-385-7019

(type of I.D.)