

APPLICATION AGENT AUTHORIZATION FORM

TO: Columbia County Zoning Department
135 NE Hernando Avenue
Lake City, FL 32055

Authority to Act as Agent

On my/our behalf, I appoint BOBBI JONES
(Name of Person to Act as my Agent)

for TOWER ENGINEERING PROFESSIONALS, INC
(Company Name for the Agent, if applicable)

to act as my/our agent in the preparation and submittal of this application
for BUILDING PERMIT - 4210 COUNTRY CLUB RD
(Type of Application)

I acknowledge that all responsibility for complying with the terms and conditions for approval of this application, still resides with me as the Applicant/Owner.

Applicant/Owner's Name: STEVE H. NICHOLS

Applicant/Owner's Title: LICENSE HOLDER

On Behalf of: ERICSSON
(Company Name, if applicable)

Telephone: 352-446-1241 Date: _____

Applicant/Owner's Signature: [Signature]

Print Name: STEVE NICHOLS

STATE OF FLORIDA
COUNTY OF SEMINOLE

The Foregoing instrument was acknowledged before me this 8 day of Aug, 2021, by STEVE NICHOLS,
whom is personally known by me TS OR produced identification TS.
Type of Identification Produced _____

[Signature]
(Notary Signature)

(SEAL)

