

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 - 494 CUMORAH HILL ST
(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: CHRISTOPHER ANTORINI

Applicant/Owner's Title: LICENSE HOLDER

On Behalf of: PEAK POWER
(Company Name, if applicable)

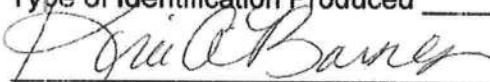
Telephone: 813-375-1692 Date:

Applicant/Owner's Signature: 

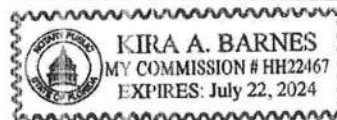
Print Name: CHRISTOPHER ANTORINI

STATE OF FLORIDA
COUNTY OF Hillsborough

The Foregoing instrument was acknowledged before me this 29 day of October, 20 20, by Christopher Antorini,
whom is personally known by me ☒ OR produced identification ☐.
Type of Identification Produced


(Notary Signature)

(SEAL)



Other 47697