

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, Ecnest Scott Jonson give this authority and I do certify that the below | | |
|---|--------------------------------------|---------------------|
| referenced person(s) listed on this form is/are under my direct supervision and control and | | |
| | ermits, call for inspections and sig | |
| Printed Name of Authorized Person | Signature of Authorized Person | Agents Company Name |
| himberly happ | Gullugheen | KOK Permitting |
| | | |
| , 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 coal Ordinances. | | |
| 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. | | |
| June Holders Signature (Notarized) TH 1025249 2/2/22 License Humber Date | | |
| STATE OF:FloridaCOUNTY OF: Alachuu | | |
| the above license holder, whose name is <u>EVALSE SCOUT Johnson</u> , personally appeared before me and is known by me or has produced identification lype of I.D.) on this <u>2</u> day of <u>February</u> , 20 22 | | |
| Shaven in meter (Seal/Stamp) | | |

