



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 LETTER OF AUTHORIZATION

I, Brent Strickland, give this authority for the job address show below  
Installer License Holder Name

only, 1568 SW Spruce St, Ft. White, FL, and I do certify that  
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

| Printed Name of Authorized Person | Signature of Authorized Person | Authorized Person is... (Check one)                                                                                              |
|-----------------------------------|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <u>Kenneth Roderick</u>           | <u>[Signature]</u>             | <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input checked="" type="checkbox"/> Property Owner |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner                       |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> 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.

[Signature]  
License Holders Signature (Notarized)

IH1104218  
License Number

7/29/2023  
Date

## NOTARY INFORMATION:

STATE OF: Florida

COUNTY OF: Suwannee

The above license holder, whose name is Brent Strickland,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) on this 29th day of July, 2023.

[Signature]  
NOTARY'S SIGNATURE

(Seal/Stamp)

