

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, Rusty L Knowl	,give this a	authority for the job address show below
only,		, and I do certify that
	Job Address	
the below referenced person(s)	listed on this form is/are	e under my direct supervision and control
and is/are authorized to purcha-	se permits, call for inspe	ections and sign on my behalf.
Printed Name of Authorized Person	Signature of Authoriz Person	zed Authorized Person is (Check one)
Sonya North	Somo No	Agent Officer Property Owner
	4.	Agent Officer Property Owner
		Agent Officer Property Owner
under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed	responsible for compliant responsible for compliant responsible for compliant responsible for by his/her or by his/her	Il permits purchased, and all work done ance with all Florida Statutes, Codes, and wer and authority to discipline a license authorized person(s) through this nce granted by issuance of such permits.
License Holders Signature (Not	arized)	1 1-1036219 10-17-23 License Number Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF:	olumbic_
The above license holder, whos personally appeared before me (type of I.D.) Andu Valle NOYARY'S SIGNATURE		has produced identification 7 day of
		OFF My Comm. Expires Jan 18, 20:



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MOBILE HOME INSTALLERS AGENT AUTHORIZATION					
I, Rush L. Known	.give this autho	rity and I do certify	that the below		
referenced person(s) listed on t	his form is/are under my dired	t supervision and	control and		
is/are authorized to purchase p	ermits, call for inspections and	d sign on my behal	lf.		
Printed Name of Authorized Person	Signature of Authorized Person	Agents Con	npany Name		
Song North	Sorg roth				
	•				
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.					
Licerse Holders Signature (Not	arized) Licens	4 - /03/37/9 se Number	<u>/o. / 7. 23</u> Date		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia					
The above license holder, whos personally appeared before me (type of I.D.)	and is known by me or has p	knowles produced identificated day of before	tion , 20 <u>23</u> .		
NOTARY'S SIGNATURE	lh typ	(Seal/Stamp)			

SANDRA ELIZABETH TOPE
Notary Public - State of Florida
Commission # HH 079583
My Comm. Expires Jan 18, 2025
Bonded through National Notary Assn.