

Viking

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICANT'S BUSINESS _____

CONTRACTOR

William Price

PHONE

407-448-0933

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County, one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the sub-contractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 29-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or unemployment, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any contractor, the smallest contractor is responsible for the corrected form being submitted to this office prior to the start of that contractor beginning any work. Violations will result in stop work orders and/or fines.

UNLICENSED	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
Qualifier Form Attached ☐		
UNLICENSED N/C	Print Name: <u>Ronald E. Bonds SR</u> License #: <u>CRC 1817658</u>	Signature: <u>Ronald E. Bonds SR</u> Phone #: <u>850-768-1453</u>
Qualifier Form Attached ☐		

§ 440.10(1)(b) Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.



March 4, 2021

STATE OF FLORIDA

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding HVAC wiring permit (if necessary) for ANY install in the STATE OF FLORIDA, on behalf of Style Crest, Inc.

ODA PRICE
JESSIE SHEPARD

V-King
185 SW Curvinton Ct
Lakeland, FL 33824

This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

Contractor's Signature

Sworn to and subscribed to before me this 4th day of March, 2021
By RONALD E BONDS, SR who is personally known to me or has produced _____
as identification and who did/did not take an oath.

Notary Public

My commission expires: 2-7-22



Style Crest, Inc. • 2901 E. 15th St. • Panama City, FL 32405 • 800-259-3470 Fax: 850-784-0745