

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

**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 subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

<b>ELECTRICAL</b>	Print Name <u>Genn Whittington</u>	Signature <u>James Wain (POA)</u>
	License #: <u>EC19002957</u>	Phone #: <u>386-684-4601</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
<b>MECHANICAL/ A/C _____</b>	Print Name <u>Micheal Boland</u>	Signature <u>James Wain (POA)</u>
	License #: <u>CAC-1817716</u>	Phone #: <u>352-274-936</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

**F. S. 440.103 Building permits; identification of minimum premium policy.**--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.

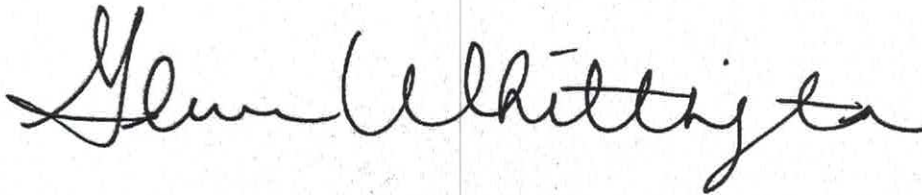
# Whittington Electric Inc.

EC13002957  
164 Queens Country Rd  
Interlachen, FL 32148  
386-684-4601  
Whitt1954@gmail.com

To whom it may concern,

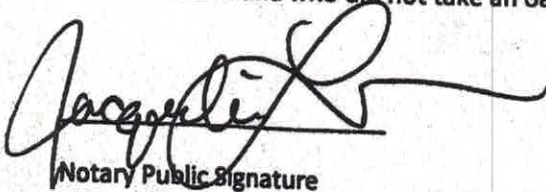
I Glenn Whittington, am writing on behalf of Whittington Electric Inc., as the Owner, to give James Warren, Power of Attorney, to pull permits, pick up permits, and anything related to permitting.

Thank You,



Glenn Whittington

The Forgoing instrument was acknowledged before me on this 12<sup>th</sup> day of January, 2023 by a Glenn Whittington who is personally known to me or has produced \_\_\_\_\_ as identification and who did not take an oath.

  
Notary Public Signature

03/28/25

My Commission Expires





PO BOX 278. OCALA, FL. 34478  
TEL 352 274-9326 FAX 352 274-9151

License Holder: Michael A Boland

License #: CAC1817716

I hereby name & appoint James Warren as an agent of Ace A/C of Ocala, LLC, to be my lawful attorney-in-fact to act for me to apply for, receipt for, sign for and do all things necessary to this appointment for \_\_\_\_\_, Florida applying to:

☐ All permits and applications submitted by this contractor

☐ The permit and application for work located at: \_\_\_\_\_

Michael Boland

License Holder Signature

State of Florida  
County of Marion

The foregoing instrument was acknowledged before me this 22 day of Jan, 2024.

By Michael Boland as identification and who did (did not) take an oath.



Jeffrey Craig Willens  
Signature of Notary

Jeffrey Craig Willens  
Print or type Notary name