

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, Wendell Crews Installers Name	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		
is/are authorized to purchase permits, call for inspections and sign on my behalf.		
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Robbin anspach	Robbin anypach	anspach Permitting
John anspach	John The Tripal	anspach Permitting anspach Permitting
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.		
License Holders Signature (Notarized) THID25316 License Number Date		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Marion		
The above license holder, whose name is <u>Windell Crews</u> , personally appeared before me and is known by me or has produced identification (type of I.D.) on this <u>28</u> day of <u>04</u> , 2020		
Thee E. Can	<u> </u>	
NOTARY'S SIGNATURE	**	(Seal/Stamp)