

COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

MORILE HOME INSTALLERS AGENT AUTHORIZATION

MOBILE HON	TE INSTALLERS AGENT ACTI	TORIZATION		
I, Da le Houston, 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		
Sorya North	Song Noon			
	*			
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) TH 113371 1012 23 License Number Date				
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia				
The above license holder, whose name is <u>Dale Houston</u> , personally appeared before me and is known by me or has produced identification (type of I.D.) on this <u>12 to</u> day of <u>October</u> , 20 <u>73</u> .				
Linds Ruth Cre NOTARY'S SIGNATURE	uf 8	(Seal/Stamp)		

Notary Public State of Florida Linda Ruth Craft My Commission HH 041829 Expires 09/13/2024



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Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, <u>Dale Houston</u> , give this authority for the job address show below			
only, 5845 SC CR 245 Lake CA, FI, 32025 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	Authorized Person is (Check one)	
Song North	Song North	Agent Officer Property Owner	
J		Agent Officer Property Owner	
		Agent Officer 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.			
License Holders Signature (No.	tarized) TH // License No	33271 W[12[23] umber Date	
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia			
The above license holder, whose name is <u>Dale Houston</u> , personally appeared before me and is known by me or has produced identification (type of I.D.) on this <u>121</u> day of <u>October</u> , 20 23.			
Linda Ruth C NOTARY'S SIGNATURE	raft	Seal/Stamp)	

Notary Public State of Florida Linda Ruth Craft My Commission HH 041629 Expires 09/13/2024