

## COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

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

\*Use to authorize Agent to pull permit on Installers behalf.

## MOBILE HOME INSTALLERS AGENT AUTHORIZATION

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 Con	npany Name
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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 (Not	arized) Licer	+1038219 nse Number	11.19. <b>24</b> 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	produced identificated ay of Nove and	
Linda Ruth Crain		(Seal/Stamp)	
		LINDA RUTH	CRAFT