



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 LETTER OF AUTHORIZATION

I, Wendell Crews, give this authority for the job address show below  
Installer License Holder Name

only, TBD DU NEWTON CIRCLE FT WHITE, and I do certify that  
Job Address

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)
"SAM" SALVATORE MARTORANA		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

Will Crews License Holders Signature (Notarized) 1H1025316 License Number 4-17-23 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: MARION

The above license holder, whose name is WENDELL CREWS  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) on this 17th day of APRIL, 2023.

Norman D. Lane  
NOTARY'S SIGNATURE

