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.

ELECTRICAL	Print Name Glenn Whittington Signature _____ License #: EC13002957 Phone #: 386-972-1700 Qualifier Form Attached ☐
MECHANICAL/ A/C _____	Print Name Ronald Bonds Signature _____ License #: CAC1817658 Phone #: 800-259-3470 Qualifier Form Attached ☐

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.

Revised 4/27/2017

WHITTINGTON ELECTRIC INC

164 QUEENS COUNTRY RD, INTERLACHEN FLORIDA 32148
PHONE: 386-684-4601 CELL: 386-972-1700 OR 1701 Ec-13002957
EMAIL:-whitt1954@gmail.com

This letter is to state that I Glenn Whittington,State certified electrical contractor #EC 13002957 authorize Brody Pack to act on my behalf obtaining permits in the State of Florida.

This authorization is to remain in effect indefinitely, unless cancelled by me in writing

Glenn Whittington

Sworn to and subscribed to before me this 7th day January 2021 by Glenn Whittington who is personally known to me.

Notary public

My commission expires_____

Notary Public State of Florida
Erika B Ashley
My Commission HH 014307
Expires 07/26/2024

STYLECREST.

March 16, 2022

STATE OF FLORIDA

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding HVAC wiring permit (if necessary) for ANY install in the STATE OF FLORIDA, on behalf of Style Crest, Inc.

Brody Pack

This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

Ronald E Bonds

Contractor's Signature

Sworn to and subscribed before me this 11th day of March, 2022
By RONALD E BONDS, SR who is personally known to me or has produced _____
as identification and who did/did not take an oath.

Denise Reinbolt

Notary Public

My commission expires: 2-7-24

NOTARIAL SEAL STATE OF OHIO

Denise Reinbolt
Notary Public, State of Ohio
My Commission Expires:
2-7-24