Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Change of Subcontractor Request

FOR OFFICE USE
DATE RECEIVED: 10/13/2025
[X] APPROVED [ ] DENIED
COMPLETED CHANGE: [X] YES
DATE PROCESSED: 10/13/2025
PROCESSED BY: N. Anderson
NOTES: Hall's WC has expired

Permit Information

- Permit #: _____
- Property Owner: Chris Mustonen
- Job Site Address: SW Faulkner Dr. Fort White Fl
- Original Subcontractor: Timothy Shatto
- License #: CAC057875
- New Subcontractor: David Hall
- License #: CAC057424

Trade (i.e. Electrical, Plumbing, HVAC, etc.): HVAC

Reason for Change:

Homeowner changed sub-contractors

Required Documents:

- Subcontractor MUST be on file with our jurisdiction. If not, complete registration by making application @ https://www.columbiacountyfla.com/PermitSearch/MyBNZPortalLogin.aspx
- New signed Subcontractor Form

Hold Harmless Acknowledgement

The undersigned agree to hold harmless and indemnify Columbia County and its agents from any claims or liability resulting from this change of subcontractor.

Signatures *(All must be notarized)*

- **Property Owner *(If Owner-Builder)***

Printed Name: _____ Date: _____

Signature: _____

State: _____ County: _____

The foregoing instrument was acknowledged before me, by means of [ ] physical presence or [ ] online notarization, this ___ day of _____, 20___, by _____, who is [ ] personally known to me or [ ] has provided the following identification:

Notary Printed Name: _____ Notary Seal:

Notary Signature: _____

- **General Contractor**

Printed Name: Kyle Johnson Date: 10.13.25

Signature: Kyle Johnson

State: FL County: Columbia

The foregoing instrument was acknowledged before me, by means of [X] physical presence or [ ] online notarization, this 13 day of October, 2025 by Kyle Johnson, who is personally known to me or has provided the following identification:

Notary Printed Name: Kimberly Koon

Notary Signature: Kimberly Koon

Notary Seal:

KIMBERLY D KOON
Notary Public - State of Florida
Commission # HH 330250
My Comm. Expires Nov 7, 2026
Bonded through National Notary Assn.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 73276 CONTRACTOR Kyle Johnson 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 Glenn Whittington License #: EC13002957 Phone #: 386-684-4609 Qualifier Form Attached ☑
MECHANICAL/ A/C _____	Print Name David Hall's Inc Signature D Hall License #: Ca.Co 57424 Phone #: 386-8755-9792 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

I, David Hall (License Holder Name), give this authority for the job address show below only, TBD SW Faulkner dr. (Job Address), 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)
Kimberly Kaan	Kimberly Kaan	X Agent ___ Officer ___ Property Owner
		___ 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 (Notarized) — CaCo 57424 (License Number) — 10/08/2025 (Date)

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Hall, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 2nd day of October, 2025.

NOTARY'S SIGNATURE

(Seal/Stamp)

JOANNA V. GATHRIGHT NOTARY PUBLIC MY COMMISSION EXPIRES 4-14-2026 STATE OF FLORIDA COMMISSION NUMBER HH 253381

Whittington Electric Inc

164 Queens Country Rd Interlachen Fl 32148 Office 386-684-4601 or 386-972-8510

Email: weoffice560@gmail.com

This Letter is to state that I, Glenn Whittington, State Certified Electrical Contractor EC13002957 Authorize Kimberly Koon to act on behalf in obtaining permits in any county or city 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 me on this 29th Day of Sept. 2025 by Glenn Whittington who is personally known to me.

Notary Public

My Commission expires 3-28-29

JACQUELINE A. LARSEN
MY COMMISSION # HH 618006
EXPIRES: March 28, 2029