

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

only,	Name ,give this autho	rity for the job address show bel
O VV	Job Address	Vhite FL, and I do certify the
the below referenced	/ \	, and i do definy ti
referenced person	(s) listed on this form is/are under	er my direct supervision and con
and is/are authorized to purch	hase permits sell for	and con
	hase permits, call for inspections	s and sign on my behalf.
Printed Name of Authorized	d Signature of Authorized	
Person	Person	Authorized Person is
James Warren	10	(Check one)
	Jamo Wacen	Agent Office
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		Agent Officer
		Property Owner
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MOBILE HON	ME INSTALLERS AGENT AUT	HORIZATION	v
DAVID ALBRIGH	,give this authority	and I do cortif	that the below
Installers Name	igno and additionty	and ruo certify	triat the below
referenced person(s) listed on t	his form is/are under my direct s	upervision and	control and
	ermits, call for inspections and si		
Printed Name of Authorized Person	Signature of Authorized Person	Agents Cor	mpany Name
JAMES WARREN	Dames Warren	FREEDOM SALES, IN	MOBILE HOME
STEVE SNITH	Ditwo Smith	FREEDOM SALES, I	MOBILE HOME
7			
under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed document and that I have full relationse Holders Signature (No.	responsible for compliance with responsible for compliance with responsible for compliance with responsible for compliance with responsibility for compliance grant tarized)	all Florida State authority to disced person(s) to ted by issuance	cipline a license
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: COLUMB	IA	
The above license holder, who	se name is DAVID ALB	RIGHT	
(type of I.D.)	e and is known by me or has produced on this do do	duced identification	ition
Sinda Penhal	gan		, 20 000
NOTARY'S SIGNATURE		(Seal/Stamp)	

