

## 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

I, Lionel Easley Installers Name	,give this a	uthority and I do certif	y that the below
referenced person(s) listed on t	his form is/are under my	direct supervision and	control and
is/are authorized to purchase p	ermits, call for inspections	s and sign on my beha	alf.
Printed Name of Authorized Person	Signature of Authorize Person	ed Agents Co	mpany Name
Misty Easler	Misty Easle	E Easter M Ser	vice, Inc
	/		
I, the license holder, realize tha	t I am responsible for all j	permits purchased, an	d all work done
under my license and I am fully			
Local Ordinances.			
I understand that the State Lice	nsing Board has the pow	er and authority to dis	cipline a license
holder for violations committed			
document and that I have full responsibility for compliance granted by issuance of such permits.			
11/1			
My Tul		H1025210	04-29-2025
License Holders Signature (Not	arized) Lie	cense Number	Date
NOTARY INFORMATION: STATE OF: HOVIDA	_COUNTY OF: SUWA	nnee	
The above license holder, whos	se name is Lionel E	aster	
personally appeared before me (type of I.D.)	and is known by me or hon this 30	as produced identifica	tion , 20 <u>2万</u> .
Matan Dayne			
NOTARY'S SIGNATURE		(Seal/Stamp)	

