



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

1402-53

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Shepherd, give this authority for the job address show below
Installer License Holder Name
only, 8998 SW JUSTENUSSEI AVENUE, 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)
KAREN HUBERSON	<i>Karen Huberson</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" 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

Robert Shepherd License Holders Signature (Notarized) 1A1025386 License Number 2-27-14 Date

NOTARY INFORMATION:

STATE OF Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Shepherd, personally appeared before me and is known by me or has produced identification (type of I.D.) 27th on this 27th day of February, 20 14.

L. A.
NOTARY'S SIGNATURE

(Seal/Stamp)

