



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 AGENT AUTHORIZATION

I, Wendell Crews, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
Brianna Kindler	<i>Brianna Kindler</i>	TNT Permitting

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.

Wendell Crews License Holders Signature (Notarized) IH1025316 License Number 5/10/22 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Pasco

The above license holder, whose name is Wendell Crews, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 10 day of May, 20 22.

Tawnya Brown
NOTARY'S SIGNATURE

