



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

I, Thomas Jones (license holder name), licensed qualifier
for Paragon Pools of North Florida (company name), do certify that
the below referenced person(s) listed on this form is/are **employed** by me directly or through an
employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
Florida Statutes Chapter 468, and the said person(s) 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 Person Authorized	Signature of Authorized Person
1. <u>Dylan Harrison</u>	1. <u>Dylan Harrison</u>
2. <u>Crystal Smith</u>	2. <u>Crystal Smith</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must notify this department in writing of the changes and submit a new letter of authorization
form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
use your name and/or license number to obtain permits.

Thomas Jones
License Holders Signature (Notarized)

CPC 1457105
License Number

5/8/2023
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Thomas Jones,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 8th day of May, 2023.

J. Emiliano Chappell
NOTARY'S SIGNATURE

(Seal/Stamp)



J. Emiliano Chappell
Notary Public
State of Florida
Comm# HH108650
Expires 3/24/2025