

NICK MATRANGA, LICENSE COMMISSIONER, MOBILE COUNTY

CERTIFICATION FOR SAWMILLS

STATE OF ALABAMA COUNTY OF MOBILE

I,	(Print Name of Owner or Officer)
	(1 This isable of Owner of Officer)
certify that I am the	
	(Title)
of the business known as	
-	(Print Name of Business)
and that the daily capacity	to the best of my knowledge and belief for said business is
	_ feet per day.
	1
	(Signature of Owner or Officer)
	(Signature of Switch of Silicon)
	(Date)