

**CITY OF LAKELAND
FAX AUTHORIZATION FORM**

Note: Contractor/Company must be currently registered with the City of Lakeland prior to using this form for fax permits.

“I, the undersigned, as qualifier for _____ give the City of Lakeland authority to accept a faxed permit application, in lieu of an original. I agree to comply with all conditions contained in the permit and agree to pay any permit fees upon receipt of an invoice from the City. I hold harmless the City of Lakeland, its agents and employees, for any claim, which may arise out of this agreement. In any action to enforce the terms hereof, the prevailing party shall be entitled to a reasonable attorney’s fee and costs.”

The following authorized representatives, through a previous Power of Attorney form recorded with the City of Lakeland Building Inspection Division have my permission to sign and take receipt of construction permits in the name of my company.

I HAVE A DEDICATED FAX LINE TO ACCEPT PERMITS AND MONTHLY SUMMARY

Contractor Name (Type or Print)

Contractor Signature

Authorized Representative

Authorized Representative Signature

Authorized Representative

Authorized Representative Signature

Authorized Representative

Authorized Representative Signature

Undersigned Contractor Information:

Contractor’s Name

Signature

Date

Company Name

Phone Number

Company Address

Fax Number

Contractors City of Lakeland Registration Number: _____

Office Use Only

Approved By

Date

File No.