



SIGNATURE AUTHORITY FORM
FOR THE PURPOSE OF OBTAINING
BUILDING PERMIT

228 S. MASSACHUSETTS AVE.
LAKELAND, FLORIDA 33801-5086
863/834-6011
TDD 863/834-8333

I, \_\_\_\_\_, \_\_\_\_\_

(Print Name Here)

(Print Business Name Here)

do hereby designate the following individual(s) as having the authority to sign and submit applications and related documents for obtaining building permits under my contractor's license. I further acknowledge and accept, as a licensed contractor, my responsibility, and liability for each project permitted under the authority designated on this form which supersedes and repeals all other previously submitted signature authority forms, and that my failure to assume and fulfill said duty may be grounds for the initiation of disciplinary action against my contractor's license.

DESIGNATED SIGNERS: (PLEASE PRINT)

- 1) \_\_\_\_\_
2) \_\_\_\_\_
3) \_\_\_\_\_
4) \_\_\_\_\_
5) \_\_\_\_\_

Designated signers may be required to provide proper identification at the request of the permit office. The number of designated signers may not exceed five (5).

This original form must be submitted for designating signature authority. You must return this form with the ORIGINAL notary seal to our office. No copies or faxes will be accepted. We are happy to provide this service; however, we reserve the right to suspend this service at any time due to its abuse or misuse.

BY: \_\_\_\_\_ (Print Qualifier's Name) \_\_\_\_\_ (Qualifier's Signature) \_\_\_\_\_ (Contractor License#)

State of Florida, County of \_\_\_\_\_, Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ (type of ID) as identification.

Signature of Notary Public State of Florida Print, Type or stamp name of Notary

My Commission Expires \_\_\_\_\_ Notary Seal