



# PERMIT AGENT AUTHORIZATION FORM

**ALL INFORMATION IS TO BE TYPED OR LEGIBLY PRINTED**

I, \_\_\_\_\_, \_\_\_\_\_,  
(Contractor's Name) **NOT COMPANY NAME** (Contractor's License No.)

hereby authorize the following to act as my agent(s) in obtaining permits in Hillsborough County, Florida.

Name of Agent	Driver's License No.

**This letter supercedes any previously submitted letter(s) of authorization.**

This letter must contain only the people you want to pull permits in your name. To make changes to this letter, you must submit a new letter. This letter will delete and replace any previous authorization letter and the information contained thereon.

**This authorization will remain in effect until cancelled in writing by the undersigned license holder.**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_\_

by \_\_\_\_\_  
(Printed/Typed Name of License Holder Making Statement)

\_\_\_\_\_  
License Holder's Signature

**NOTARY PUBLIC**

\_\_\_\_\_  
(Signature of Notary)

\_\_\_\_\_  
(Name of Notary Typed, Printed, or Stamped)

My Commission expires: \_\_\_\_\_  
Personally Known \_\_\_\_\_ OR Produced Identification

\_\_\_\_\_  
(Type of Identification Produced)

*Affix  
Notary  
Seal*