

# Board of County Commissioners

Okeechobee County

Code Compliance Department

1700 NW 9<sup>th</sup> Avenue · Suite A · Okeechobee, Florida 34972 · (863) 763-5548



## PERMIT AUTHORIZATION FORM

ORIGINAL FORM TO BE SUBMITTED WITH PERMIT APPLICATION

License Holder: \_\_\_\_\_ License Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

I authorize the following individual(s) agencies to act as my agent in all permitting procedures with Okeechobee County Building Department for the following project:

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Authorized Person(s) Agencies (PLEASE PRINT CLEARLY)

\_\_\_\_\_  
\_\_\_\_\_

I understand I remain fully responsible and liable for all construction performed under my license.

Signature of License Holder: \_\_\_\_\_

Date: \_\_\_\_\_

Signed and acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_. He/she has produced identification or is personally known to me.

\_\_\_\_\_  
Notary Signature