



Jackson County Building Department
 4487 Lafayette St.
 Marianna, FL 32448
 850-482-9802, Fax 850-718-0029
permitting@earthlink.net

LETTER OF AUTHORIZATION TO
 SIGN FOR PERMIT

DATE: _____

I, _____ qualifier of license number _____ do hereby grant those names listed below authorization to sign for any and all documents necessary to secure permits in Jackson County, Florida.

Names of Authorized Persons:

_____	_____
_____	_____
_____	_____
_____	_____

This will be the only permit the above listed person(s) has authorization to sign.

 Signature of License Qualifier

 Date

STATE OF FLORIDA
 COUNTY OF JACKSON

The foregoing instrument was acknowledged before me this _____ day of _____, 20____.

By _____ who is personally known to me or who has produced _____ as identification, and who did not take an oath.

 Notary Public

(affix stamp)

Note: This authorization will remain valid unless otherwise noted or until qualifier sends notice of cancellation of this document or replaces with updated document.