



**CITY OF TARPON SPRINGS  
BUILDING DEVELOPMENT  
DEPARTMENT**

324 E Pine Street  
Tarpon Springs, FL 34689  
Phone: (727) 942-5617  
dsinfo@ctsfl.us

**LETTER OF AUTHORIZATION  
FORM**

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

I, \_\_\_\_\_, license holder for \_\_\_\_\_

License number \_\_\_\_\_ Contractors signature \_\_\_\_\_

Hereby name and appoint the following person(s)

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

To be my lawful attorney-in-fact to

- (a) Sign and submit permit applications, (b) obtain building permit, and/or (c) obtain the certificate of occupancy  
(Circle all that apply).**

Contractor is responsible for maintaining appointed person(s). \_\_\_\_\_  
(initial)

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_,  
of 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me ( )  
or has produced \_\_\_\_\_ as identification

\_\_\_\_\_ Seal

Notary Public (Signature)

\_\_\_\_\_

Notary Public (Print name)