

THE CITY OF KEY WEST

Building Department P.O.Box 1409, Key West, FL 33040

2014

Contractor Agent Authorization Letter

(** note: this form must be completed each calendar year)

Contractor Company Name:
Contractor Qualifier Name:
Agent Name(s):
I,, hereby authorize the above listed agent(s) to sign
for permits for, for the calendar year ending project name/address, or unlimited
December 31, 2014.
The undersigned understands the liabilities involved in the granting of this authority and accepts full responsibility (thus holding the City of Key West harmless) for any and all of the actions of the agent(s) named related to the acquisition of permits for the contracting company listed above.
Signature of Contractor Qualifier
State of County of
Subscribed and sworn to before me this day of, 20
Notary Public (seal)