



City of Belleair Bluffs
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<http://safebuilt.com/locations/florida-gulf-coast-office>

CONTRACTOR AUTHORIZATION LETTER



Date: _____ (Letters are valid for one year after issuance)

I, _____, of _____,
do hereby authorize the following to act as my agent(s) in submitting permit applications for
the City of Belleair Bluffs.

Please provide the below information for each Authorized Agent:

- | | |
|--------------------|--------------------------|
| 1) _____ (Name) | _____ (Email Address) |
| 2) _____ (Name) | _____ (Email Address) |
| 3) _____ (Name) | _____ (Email Address) |
| 4) _____ (Name) | _____ (Email Address) |

I understand that I am the licensed qualifier of records responsible for the application as submitted by my agent(s), as referenced above. I further understand that each time my agent(s) submit an application and plans for electronic submittal, or signs any required documents, that the individual must exhibit this authorization form to the permitting staff upon request. I further acknowledge that this original authorization form is in my license or qualification file for legal reference purposes.

Contractor Signature

Contractors License Number

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me by means of ____ physical presence or
____ online notarization this _____ day of _____, 20 ____ by
_____ who is personally known to me or has produced
_____ as identification.

NOTARY PUBLIC