



WEB PAGE AUTHORIZED AGENT FORM

MANATEE COUNTY BUILDING DEPARTMENT

P.O. BOX 1000, BRADENTON, FL 34206

OFFICE (941) 749-3078

FAX (941) 742-5825

Date: _____

I, _____ OF _____,
(Name of License Holder) (Print Business Name)

DO HEREBY AUTHORIZE THE FOLLOWING TO ACT AS MY AGENT(S) IN SUBMITTING PERMIT APPLICATIONS **ON-LINE** IN THE UNINCORPORATED AREA OF MANATEE COUNTY:

1) _____,
(Print Name of Authorized Agent)

1) _____
(EMAIL ADDRESS OF AGENT)

2) _____,
(Print Name of Authorized Agent)

2) _____
(EMAIL ADDRESS OF AGENT)

3) _____,
(Print Name of Authorized Agent)

3) _____
(EMAIL ADDRESS OF AGENT)

4) _____,
(Print Name of Authorized Agent)

4) _____
(EMAIL ADDRESS OF AGENT)

I UNDERSTAND THAT I AM THE LICENSED QUALIFIER RESPONSIBLE FOR THE APPLICATION AS SUBMITTED BY MY AGENT(S), AS REFERENCED ABOVE. I FURTHER UNDERSTAND THAT EACH TIME MY AGENT(S) SUBMITS AN APPLICATION FOR A PERMIT, 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's Signature)

(Registration/Certification/License Number)