

**JACKSON COUNTY BUILDING SERVICES
LETTER OF AUTHORIZATION**

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 HAS
AUTHORIZATION TO SIGN.

SIGNATURE OF LICENSE QUALIFIER

DATE

State of Florida, County of Jackson

The foregoing instrument was acknowledged before me by means of _____ physical presence or _____ online
notarization, this _____ day of _____, 20____ by

_____.

(Notary Seal)

Notary Public Signature

Personally Known _____ or Produced Identification _____
Type of Identification _____

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