



18001 Gulf Boulevard  
 Redington Shores, FL 33708  
 727.202.6825

## 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 Town of Redington Beach and the Town of North Redington Beach.

Please print the name and email address of each Authorized Agent.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

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