

LETTER OF AUTHORIZATION

(Authorizing persons to sign for permits)

DATE: _____
COMPANY NAME: _____
ADDRESS: _____
ADDRESS: _____
EMAIL ADDRESS: _____
TELEPHONE: _____
FAX: _____

I, _____ hereby
authorize the following person(s) to act on my behalf, to pick up, sign for and
schedule inspections under my license; number: _____,
_____, _____

NAMES:

_____	_____
_____	_____
_____	_____
_____	_____

SIGNED: _____

DATE: _____

NOTARIZED BY: _____

PRINTED NAME: _____

DATE: _____

COUNTY OF: _____

My Commission Expires: _____

Acting in County of: _____