



**Marion County  
Board of County Commissioners**

Building Safety ♦ Licensing

2710 E. Silver Springs Blvd.  
Ocala, FL 34470  
Phone: 352-438-2429  
Fax: 352-438-2430

**AUTHORIZATION FORM**

Date: \_\_\_\_\_

Name of license holder: \_\_\_\_\_

County Certificate # or State License # \_\_\_\_\_

The following person(s) are authorized to sign for permits for the above referenced license holder. All person(s) authorized to sign must produce a valid Driver's License or Government issued photo ID card and a Photo with this application. This Authorization is for Permit Applications only.

<b>NAME(S): PLEASE PRINT</b>	<b>SIGNATURE(S):</b>	<b>RELATIONSHIP</b>

**Authorization forms are good 12 months of dated form.  
(Unless otherwise specified if less than 12 months \_\_\_\_\_)**

\_\_\_\_\_  
(Signature of Contractor)

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year),

by \_\_\_\_\_ (name of person making statement).

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_  
Type of Identification Produced

LIC 16 – REV 5/20/14

*“Meeting Needs by Exceeding Expectations”*