



Agent Authorization Form
Building Department
City of St. Pete Beach, Florida 727-363-9241

I _____
(License holder's printed name)

hereby authorize _____
(Agent's printed name)

to represent me in an application for _____
(Type of application: Building)

Signature of license holder

Signature of agent

**The foregoing instrument was acknowledged before me this _____ day
of _____ 20____, by _____ who
is personally known _____ or produced _____ as
identification.**

(Notary Signature) (Date)

My commission expires _____