



# Town of Redington Shores

17425 Gulf Blvd - Redington Shores FL 33710  
727-397-5538

## Permit Agent Authorization

I, \_\_\_\_\_ (License Holder's Name NOT Company Name) \_\_\_\_\_ (Contractor's License #)

hereby authorize the following to act as my agent(s) in obtaining permits in Pinellas County, Florida.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**It is the responsibility of the License Holder to notify this office of agent removals**

License Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF PINELLAS

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ year, by \_\_\_\_\_.

Personally Known OR  Produced Identification

\_\_\_\_\_  
Type of Identification Produced

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

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

(Notary Seal)

(Commission Number)

(Expiration Date)