

## **Town of Redington Beach**

Building Permit Office: Town of Redington Shores 17425 Gulf Blvd Redington Shores FL 33708 727-262-2218

## Permit Agent Authorization

I,(License Holder's Name <u>NOT</u> Company Name)	(Contractor's License #)
hereby authorize the following to act as my agent(s) Florida.	) in obtaining permits in the Town of Redington Beach,
Valid for one year. It is the responsibility of the L	icense 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 mea	ns ofphysical presence oronline notarization on this
(day) (month) (year)	(name of person acknowledging)
Personally Known ORProduced Identification	(Signature of Notary Public -State of Florida)
(Type of Identification Produced)	(Print or Type Name of Notary Public)
	(Commission Number) (Expiration Date)

(Notary Seal)