



Building Construction Services  
8661 Citizens Drive, Suite 100  
New Port Richey, FL 34654

**CONTRACTOR AUTHORIZATION FORM**

PASCO COUNTY NO.: \_\_\_\_\_

STATE LICENSE NO.: \_\_\_\_\_

PRINT QUALIFIER'S NAME: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

**\*THIS AUTHORIZATION SUPERSEDES ALL PREVIOUS SUBMITTED AUTHORIZATIONS\***

I authorize the following individuals to sign for and obtain permits: (Please print names clearly.)

_____	_____
_____	_____
_____	_____
_____	_____

**Signature of Qualifier:** \_\_\_\_\_ **Date:** \_\_\_\_\_

State of Florida  
County of Pasco  
Sworn to and subscribed before this day \_\_\_\_\_

\_\_\_\_\_  
Notary Public State of Florida

(Stamp)  
My commission expires \_\_\_\_\_