

# ***EPCI***

## **PANAMA CITY BUILDING DEPARTMENT**

647 Jenks Ave Site A

PANAMA CITY, FL 32401

PHONE: 850-818-0213 \* FAX: 850-818-0214

### **LETTER OF AUTHORIZATION**

I, \_\_\_\_\_, QUALIFIER OF \_\_\_\_\_

DO THIS DATE \_\_\_\_\_, GRANT UNTO \_\_\_\_\_

AUTHORIZATION TO SIGN FOR AND/OR MY NAME TO ANY AND ALL DOCUMENTS  
NECESSARY TO SECURE PERMITS IN PANAMA CITY, FLORIDA.

LICENSE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

LICENSE HOLDERS CONTACT INFORMATION:

PHONE # \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PERSON AUTHORIZED INFORMATION:

PHONE # \_\_\_\_\_ ADDRESS: \_\_\_\_\_

**THIS AUTHORIZATION EXPIRES SEPTEMBER 30, \_\_\_\_\_.**

STATE OF FLORIDA

COUNTY OF BAY

SWORN TO AND SUBSCRIBED BEFORE ME \_\_\_\_\_

PERSONALLY APPEARED PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED

IDENTIFICATION \_\_\_\_\_

WITNESS MY HAND AND OFFICIAL SEAL, THIS \_\_\_ DAY OF \_\_\_\_\_ A.D. \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC-STATE OF FLORIDA

MY COMMISSION EXPIRES: \_\_\_\_\_