



DEPARTMENT OF ENVIRONMENTAL HEALTH & SAFETY

Building Code Administration

124 Mendenhall Building "A"

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**CONTRACTOR AUTHORIZATION LETTER**

**(This authorization supersedes all previous authorizations on file with FSU Building Code Administration)**

Printed Name of Qualifier	Signature
Company Name	Telephone Number
State Contractor's License Number	E-Mail Address

The below named individuals are authorized to sign for permits and transact business for the company identified above. I understand that it is my responsibility as the Qualifying Agent to keep this information current and to submit a new Authorization Letter each time a change needs to be made to the below list of individuals. I also understand that as the Qualifying Agent I am responsible for all permits pulled and work done.

- |                          |                          |
|--------------------------|--------------------------|
| 1. _____<br>Printed Name | 2. _____<br>Printed Name |
| 3. _____<br>Printed Name | 4. _____<br>Printed Name |
| 5. _____<br>Printed Name | 6. _____<br>Printed Name |
| 7. _____<br>Printed Name | 8. _____<br>Printed Name |

I further submit that I am knowledgeable of Chapter 489, Florida Statutes. I understand that the Construction Industry Licensing Board and Electrical Contractor's Licensing Board have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and laws inherent in the privilege granted by issuance of such permits.

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ (date), by \_\_\_\_\_ (name), who is personally known to me OR who has produced \_\_\_\_\_ (type of identification)

WITNESS my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public State of Florida Signature (Printed Name) Notary Commission Seal/Stamp