**Permit #:**

**Site Address:**

 Street City State Zip

**SUBCONTRACTOR AUTHORIZATION**

I hereby authorize the following contractor or individual to include me as a subcontractor for the referenced job.

**Contractor Name:** **License #:**

 (Print Name of License Holder or Property Owner)

**Contractor Company Name:**

 (Print Company Name)

**Subcontractor Name:** **License #:**

 (Print Name of License Holder)

**Subcontractor Company Name:** **Phone #:**

**TYPE OF WORK**

**□** Plumbing □ Electrical □ Mechanical □ Roofing □ Other

 (specify)

 Signature of License Holder (subcontractor) Date

STATE OF FLORIDA

COUNTY OF BREVARD

Subscribed and sworn to before me by (\_\_) physical presence or (\_\_) remote audio-visual means, this day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_who is personally known to me or who has produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as identification, and who did/did not take an oath.

 S E A L \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary’s Signature