

Board of County Commissioners

-----Okeechobee County-----

Building Department

1700 NW 9th Avenue, Suite A, Okeechobee, Florida 34972 (863) 763-5548



PERMIT AUTHORIZATION FORM

ORIGINAL FORM TO BE SUBMITTED WITH PERMIT APPLICATION

OWNER BUILDER

Property Owner Name: _____

Address: _____

Phone: _____ Email Address: _____

I authorize the following individual(s) to act as my agent in all permitting procedures with Okeechobee County Building Department for the following project:

Project Name: _____

Project Address: _____

Authorized Person(s) – PLEASE PRINT CLEARLY:

I understand that I remain fully responsible and liable for all construction performed under my license.

Signature of Property Owner

Date: _____

Signed and acknowledged before me on this the _____ day of _____, 20____. The above signed individual:

☐ produced identification _____ or ☐ is personally known to me.

My Commission Expires:

Signature of Notary