OFFICE USE ONLY ABOVE THIS LINE	
DATE:	
Property Owner's Name, Mailing Address, and Teleph	none Number:
OW Permit ting and Inspection Section	·
ransportation Services 885 South Horseshoe Drive	
aples, FL 34104	
E: Letter of Authorization of Right-of-Way Permitting	
o whom it may concern:	
cting Agent's Name Name of Agent's F	Business
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