

AUTHORIZATION FORM

2800 N. HORSESHOE DRIVE, NAPLES, FL 34104 (239) 252-2400

Email to: permitting.dept@colliercountyfl.gov or Fax to: 239-252-3990

Permit Number (if applicable)				
		Allo	ow Electronic Submittal for Paper Permits	
This Autho	rization is:			
ONE TIMI	E JOB-SPECIFIC for Job Address:_			
☐ To ADD a	n Authorized Person(s)			
☐ To REPLA	CE an Authorized Person(s)			
ı		as the O	wner-Builder/Qualifier and License Holder for	
Printed Name of Owner Builder/Qualifier		er/Qualifier , as the o	wher ballacty qualifier and License Holder for	
		ند حالم ند	to the following individual/s) to set as my accept	
Self/Company Name			, authorize the following individual(s) to act as my agent in submitting and/or obtaining permits.	
	<u>-</u>			
SELECT an Option and PRINT Name of Authorized Person(s) Below:				
Add Remove	Authorized Person	Portal Account Name	Portal Account Email	
				
11-1				
Unaer pend	aiπes oj perjury, i declare tha	it i nave read the Joregoing docume	ent and that the facts stated in it are true.	
0 110 1 0				
Qualifier's Signa	ture:			
State of	Count	y of		
The foregoing in	nstrument was acknowledged before	e me by means of $\ \square$ physical presence or	\square online notarization this day of	
		owner or qualifier)		
Such person(s) Notary Public must check applicable box: Must Comply with Notarial Law				
□ Are personally known to me□ Has produced a current drivers license			Notary Seal	
☐ Has produced as identification.			Notally Seal	
Notary Signature:				