



# **THE CITY OF KEY WEST**

**Building Department**

P.O. Box 1409, Key West, FL 33041

phone: 305-809-3956

KeyWestCity.com

## **SUB-CONTRACTOR AUTHORIZATION**

**Permit #** \_\_\_\_\_

**Jobsite address** \_\_\_\_\_

**Pool Contractor or GC** \_\_\_\_\_

**Electrical Subcontractor** \_\_\_\_\_

**Plumbing Subcontractor (if applicable)** \_\_\_\_\_

**This letter authorizes the above Pool Contractor or General Contractor to make application, receive permits, and call for inspection for the above referenced job.**

This authorization becomes effective on the date this authorization is signed and remains in effect until final inspection or terminated by any party. This authorization acts as a durable power of attorney only for the purposes stated. The undersigned understands the liabilities involved in the granting of this agency and accepts full responsibility (holds the City of Key West harmless) for any and all of the actions of the agent(s) named, related to the acquisition of permits for the aforementioned company.

**Signature of subcontractor qualifier** \_\_\_\_\_ **Date** \_\_\_\_\_

State of Florida  
County of Monroe

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_ Personally known \_\_\_ / ID \_\_\_\_\_

