



THE CITY OF KEY WEST

Building Department

PO Box 1409, Key West, FL 33040

2019 Homeowner Agent Authorization Letter (for Permit Extensions Only)

Property Address: _____

Homeowner Name: _____

Agent Name(s): _____

I, _____, hereby authorize the above listed agent(s) to pick up
Homeowner name

Permit extensions for _____, for the calendar year
Project name/address, or unlimited
ending December 31, 2019.

The undersigned understands the liabilities involved in the granting of this authority and accepts full responsibility (thus holding 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 property owner listed above.

Further the homeowner acknowledges all rules and restrictions set forth in the disclosure statement pursuant to Florida Statute 489.103(7).

Signature of Property Owner

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public (seal)