



CONTRACTOR AUTHORIZATION FORM

NOTICE: The original notarized document must be on notarized and may be mailed or hand delivered. Or the qualifier can email the form over electronically to permits@talgov.com.

Name of Firm Licensed: _____

Qualifier: _____ Title: _____

Qualifier's License Number: _____

AGENT(S) NAME

(please print or type)

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

The above named individuals are authorized to sign for permits and transact business for the company identified above. I understand that it is my sole responsibility as the qualifying contractor to keep this information current and resubmit a new accurate authorization form each time a change needs to be made to the above list of individuals.

SIGNATURE OF QUALIFIER

DATE

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by _____

who is ☐ personally known to me or ☐ has produced _____

as identification and who did not take an oath.

WITNESS my hand and official seal this _____ day of _____ A.D., 20 _____.

Notary Public Signature

Notary Public Seal