

AGENT

I hereby name and appoint the following person(s) as an Agent to sign issued building permits for work commencing within the Central Florida Tourism Oversight District (the District), and to have access to the Accela Citizen Access Online Permitting System (ACA): <https://ca.rcid.org/citizenaccess>. (This authorization does not grant the Agent the ability to sign permit applications on behalf of the qualifier.)

Note: No modifications should be made to this form (e.g., adding an expiration date for a user or project specific information.)

Name	Cell	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

LICENSE HOLDER/QUALIFIER INFORMATION REQUIRED			
License Holder:	_____	_____	_____
	Signature	Print Name	Date
Company:	_____		Main Office Phone: _____
License Holder Email:	_____		License Holder Direct Phone: _____
Address:	_____	City: _____	State: _____ Zip: _____
State License #:	_____		or County Competency #: _____

State of Florida, County of _____

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20 _____

Personally Known
 Produced Identification _____
Type of Identification

Notary Stamp Here

Notary as to License Holder:

Signature