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## GROWTH MANAGEMENT DEPARTMENT

CITY OF -

Phone: (386)719-5750

Fax: (386)758-5426

growthmanagement@lcfla.com

## CONTRACTOR'S AUTHORIZED SIGNEE FORM

	Date of Growth Management Acceptance:
	Business Name: GEORGE CONSTRUCTION LLC
	Owner's Name: LUCIOUS GEORGE Phone #: (386 ) 623 - 2643
	Business Address: 394 NE FRONIE STREET Phone #: (386 ) 623 - 2643
	City: LAKE CITY State: FLORIDA Zip: 32055
	Qualifier's (Contractor)Name: ANTHONY GEORGEJR.
	Type of Contractor: GENERAL
	State Certification #: GCG016583 Lake City Business License #: 4513
	Émail Address: hgdatlga@yahoo.com Facsimile: 404-212-5051
	STATEMENT
	l, the above named qualifying contractor, for the above named business, hereby allow the following person(s) to apply for and sign permit applications and permits in my absence:
	(please print) AUTHORIZED SIGNEENAME: <u>LUCIOUS GEORGE</u>
	(please print) AUTHORIZED SIGNEENAME:
	(please print) AUTHORIZED SIGNEENAME:
abov	her certify that the above information is true and correct to the best of my knowledge and agree to hold the City of Lake harmless from, any and all responsibility, claims or other actions arising from or related to the City's acceptance of the eagent's signature for permit-related activities. I further understand that it is my sole responsibility to grant and terminate such authorization and to ensure that the City receives timely notice of any such grant or termination. This Affidavit is for one (1) year from date of Growth Management acceptance.  ANTHONY GEORGE, JR.  Signature of Qualifier (Contractor)  Print Name
	COUNTY OF FULTAL
	Subscribed and sworn to before me this C3 day of July 20/9 by 477-
	who has produced Florida Driver's License # 0552854 38 as identification.
	(seal or stamp)  Commission Expiration: C 4//c/2 3  COUNTY AND TO SERVICE TO