

GROWTH MANAGEMENT DEPARTMENT

Phone: (386)719-5750

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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 GEORGE JR.	
Type of Contractor: GENERAL	
State Certification #: GCG016583 Lake Cit	y Business License #: 45 \ \ 3
Email Address: hgdatlga@yahoo.com F	acsimile: 404-212-5051
STATEMEN	т
I, the above named qualifying contractor, for the above named busine and sign permit applications and permits in my absence:	ess, hereby allow the following person(s) to apply for
(please print) AUTHORIZED SIGNEENAME: <u>LUCIOUS</u>	GEORGE
(please print) AUTHORIZED SIGNEENAME:	
(please print) AUTHORIZED SIGNEENAME:	
further certify that the above information is true and correct to the best of city harmless from, any and all responsibility, claims or other actions arisin bove agent's signature for permit-related activities. I further understand the ny such authorization and to ensure that the City receives timely notice of alid for one (1) year from date of Growth Management acceptance.	ng from or related to the City's acceptance of the sat it is my sole responsibility to grant and terminate
1	ANTHONY GEORGE, JR.
Signature of Qualifier (Contractor)	Print Name
COUNTY OF FULLOW	1
Subscribed and sworn to before me this 2 day of day	12 20/9 by ANTHONY CALLERY
who has produced Florida Driver's License # 055885438	
(seal or stamp)	Notary Signature Notary Name (type/print)
(seal or stamp) Commission Expiration: Complete State	, carro (Operprint)