

BUILDING DEPARTMENT

190 Malabar Road SW • Suite 105 • Palm Bay, Florida 32907 Phone: 321-953-8924 • Email: buildingpermits@palmbayflorida.org

YEARLY SUBCONTRACTOR PERMIT AUTHORIZATION

I hereby authorize the following contractor to include me as a subcontractor from January 1, 2022 through December 31, 2022

General Contractor's Name:				License #:	
			E OF License Hold		
General Contrac	tor Company	Name:			
			(Pr	rint COMPANY Name)	
Description of w	ork to be don	e:			
Subcontractor's	Name:	License #:			
		(Print NAM	E OF License Hold	ler)	
Subcontractor C	Company Nam	ie:			
		TYI	PE OF PERMIT		
Building	Electrical	Plumbing	Mechanical		
Drywall	Roofing	Specialty _			
			(Sp	pecify specialty type)	
Signature of Subcontractor License Holder				Date	
STATE OF FLOF					
Sworn to (or affirm	med) and subs	cribed before	me by means of	physical presence or	
online notarization, thisday o			of	, 20	
by					
	Known OR				
_					
Signature of Nota	on Dublic Sta	ato of Florida			
Signature of Nota	ary Fublic – Sta	ale oi Fiorida			

Print, Type, or Stamp Commissioned Name of Notary Public