

**POWER OF ATTORNEY AND AUTHORIZATION
TO DRAW CONSTRUCTION PERMITS**

FROM: _____
(Company Name)

(Company Address)

(Company Phone #)

TO: City of Lake Wales, Development Services
201 Central Avenue West
P. O. Box 1320
Lake Wales, FL 33859-1320

DATE: _____

I, _____, THE HOLDER OF STATE
REGISTRATION NUMBER _____, HEREBY NAME, CONSTITUTE AND
APPOINT _____ MY ATTORNEY-IN-FACT FOR THE PURPOSE
OF APPLYING FOR AND RECEIVING PERMITS IN MY NAME. I HEREBY REPRESENT
AND WARRANT TO THE CITY OF LAKE WALES THAT ALL WORK PERFORMED
UNDER THE AUTHORITY OF SUCH PERMITS SHALL BE PERFORMED BY ME OR
UNDER MY SUPERVISION, AND THAT I SHALL BE FULLY RESPONSIBLE FOR THE
PROPER PERFORMANCE OF SAID WORK.

**I WILL LET THE CITY OF LAKE WALES
BE AWARE OF ANY CHANGES.**

(Signature of Contractor)

(Signature of Designated Attorney-In-Fact)

STATE OF FLORIDA
COUNTY OF POLK

Subscribed and sworn to me this ____ day of _____, 20____.

Notary Public

Seal:

FORMS:PermitPOA.wpd