

I,	, of	3
print name		
hereby attest that	, has a	leasehold interest in the
company name (lessee) tower indicated below, and is authorized under said lease and by the tower and property owner, to make certain modifications to the tower installation as required and authorized under said lease and as regulated under state and local laws and building codes.		
Parcel I.D. Number		Permit # TCB
Tower Owner:		
Tower Address:		
Contractor's Name	Contractor's License #	
By signing below, I further attest that I am an agent of the lessee as indicated above, and authorized to apply for and coordinate the required permit applications as necessary for the work to be permitted under said permits. The application is made in good faith and all information contained therein is accurate and complete to the best of my knowledge and belief.		
Signature	Print Name	Date
NOTARY INFORMATION (Please use appropriate block.)		
STATE OF COUNTY OF		
Individual Before me, this day of executed the foregoing instrument, and a	, 20, personally appeared cknowledged before me that same was execute	who who d for the purposes therein expressed.
Corporation		
Before me, thisday of, 20, personally appeared of, a corporation , on behalf of the corporation, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.		
Partnership		
Before me, this day of, 20, personally appeared, a partner/agent on behalf of, a partnership, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.		
Government Entity		
Before me, this day of	, 20, personally appeared	as
and on behalf of, who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.		
	NOTARY STAMP:	
Signature of Notary	My commission expires:	
Print Notary Name	Identification Method:Personally k Produced I.	nown. D. – Type:

Growth Management Department | Building Inspection Division | Phone: (850)891-7001, option 2 | Fax: (850)891-0948 Location: 435 N. Macomb Street, Tallahassee, FL 32301 | Mailing: 300 S. Adams Street B-28, Tallahassee, FL 32301