

PIKES PEAK REGIONAL BUILDING DEPARTMENT

PERMIT AUTHORIZATION

Business Name: _____ Contractor ID# _____

I, _____, hereby authorize _____, who is at least 18 years old as of today, and is **EMPLOYED** by this business with the job title of _____ to sign for and obtain building permits from Pikes Peak Regional Building Department. You must provide an email address and phone number below for the person you are authorizing

Email: _____ Phone: _____

I reserve the right to have Pikes Peak Regional Building Department rescind, at any time, the authorization I have given. I understand it is a violation of the Pikes Peak Regional Building Code to obtain permits without authorization.

To rescind a previously filed Permit Authorization you must provide a letter to PPRBD Contractor Licensing Department.

Examinee: _____ Date: _____
(Sign before a Notary Public if not signing in person)

State of Colorado

County of El Paso

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____ by _____.

(Examinee)

Notary Official Signature

Commission Expiration