



**Contractor Letter Of Intent
Sign-On**

Contractor Signing On _____
Contractor Phone Number _____
Project Number _____ Project Name _____
Project Address _____
Real Estate Number _____
General Contractor/Owner: _____
Project Agent Name: _____

This authorization becomes effective on the date this affidavit is notarized, and shall remain in effect until terminated by the undersigned. This authorization acts as a durable power of attorney only for the purposes stated.

The undersigned understands the liabilities involved in the granting of this agency and accepts full responsibility (thus hold the City of Marathon harmless) for any and all of the actions of the agent(s) named, related to the acquisition of permits for the aforementioned company.

Print Name of Qualifier _____ Date _____

Signature of Qualifier

NOTARY STATE OF _____
COUNTY OF _____
Before me, this ____ day of _____, 20____, personally appear _____
Who executed this foregoing instrument, and acknowledged before me that same was executed for the purposes therein expresses.
 Personally Known or Produced ID: _____

Signature of Notary Public – State of _____ My Commission Expires: _____

Please provide the above information by 1) Bringing it directly to City Hall (notary services are available), 2) Mailing it to the address listed below, or 3) Email to inspections@ci.marathon.fl.us
Note: Form must be notarized prior to mailing or emailing.