

<p>Hakim Bayoud Director</p> <p>Lonnie Hamilton, III Public Services Building 4045 Bridge View Drive, Room A311 North Charleston, SC 29405-7464</p>	 <p>CHARLESTON COUNTY SOUTH CAROLINA</p> <p>BUILDING INSPECTION SERVICES</p>	<p>Administration 843.202.6940 Fax: 843.202.6954</p> <p>Inspections and Contractor Licensing 843.202.6930 Fax: 843.202.6936</p>
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Authorization Statement

Authorizations will not be accepted unless signed and dated. Stamped or electronic/digital signatures will not be accepted.

I, _____, give authorization for the below listed names to pull permits and obtain or renew Contractor's Licenses with Charleston County on my behalf:

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____
- 6.) _____

Signature of License Holder

Date

Please Note:

- A new authorization statement will be needed with every license renewal
- Authorization statements need to be submitted with a copy of the **license holder's driver's license**
- The authorization does not need to be notarized

FOR OFFICE USE ONLY

License No: _____
Verified by: _____

Received Date: _____



Professionally We Serve, Personally We Care!

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