



CITY OF BELLE ISLE, FLORIDA

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

POWER OF ATTORNEY

Date: _____

Permit #: _____

I hereby name and appoint _____ of
(print name)

_____ to be my lawful attorney-in-fact to act for
(company name)

me and apply to the City of Belle Isle Building Department for a _____ permit
(type of permit)
for work to be performed at the following location:

_____, Belle Isle, FL 32809 32812 and
(street address)

to sign my name and do all things necessary to this appointment.

Certified Contractor's Printed Name: _____

License Number: _____

Certified Contractor's Signature: _____



The foregoing instrument was acknowledged before me this _____ days of _____ of 20_____

by _____ who is personally known to me or who produced

_____ as identification and who did not take an oath.

State of Florida
County of Orange

Notary Public, Orange County, Florida

(seal)