

CITY OF PENSACOLA HOUSING OFFICE SIGNATURE AUTHORIZATION

The Management Company/Agent for the unit(s) listed below is either licensed by the State of Florida, or employed by the Property Owner of Record, and has authorized the following employees to sign HAP contracts executed with the City of Pensacola Housing Office.

UNIT / PROPERTY NAME: _____

UNIT / PROPERTY ADDRESS: _____

Primary Signer: _____

Title: _____

Signature: _____

The following employees are authorized to sign HAP contracts on behalf of the Property Owner/Agent listed above (please include a photo ID with each name listed on this form):

Name (please print): _____

Job Title: _____

Signature: _____

Name (please print): _____

Job Title: _____

Signature: _____

Name (please print): _____

Job Title: _____

Signature: _____

Name (please print): _____

Job Title: _____

Signature: _____

Please keep a copy of this authorization form on file as it may be requested for verification purposes.