



**LETTER OF AUTHORIZATION
FOR HOME BUSINESS**

**Community Services Department
65 Stone Street, Cocoa, Florida 32922
Phone: (321) 433-8535 – Fax: (321) 433-8543
www.cocoaf1.org**

I, _____ being first duly sworn, depose and say, that I am the
(PRINT NAME OF PROPERTY OWNER)

fee simple owner of the property described below, and I hereby authorize

_____ of _____
(PRINT NAME OF APPLICANT) (PRINT NAME OF BUSINESS)

to operate a business at this property in accordance with all applicable laws and ordinances.

PROPERTY ADDRESS: _____

PARCEL ID:

• Township _____ Range _____ Section _____ Block _____ Lot _____
(Go to www.brevardpropertyappraiser.com for Parcel I.D. information)

(OWNER SIGNATURE)

(PRINT/STAMP NOTARY PUBLIC NAME)

Personally Known --or-- Produced Identification
Type of I.D. Produced:

(NOTARY PUBLIC SIGNATURE)

STATE OF FLORIDA, COUNTY OF BREVARD

Sworn and subscribed to before me this _____ day of _____, 20 ____