



4585 Charlotte Street, Haverhill, Florida 33417 (561) 689-0370 Ext. 2 <u>www.townofhaverhill-fl.gov</u>

Change of Contractor Request Form

Permit:	Permit Address:	
	SECTION A ((RELEASED CONTRACTOR)
Name of Contra	actor/Company Being Release	d:
Name of Qualif	ied/Authorized Agent:	
Signature of Ak	ove:	Date:
Contractor's Li	cense No	
	Ν	OTARY SECTION
STATE OF FLO COUNTY OF	RIDA	
Sworn to (or af notarization on	firmed) and subscribed before this day of	e me by means of
Notary's Signat	ture:	Stamp/Seal
🗌 Personally k	nown or Type of Identificatio	on Produced:
Name of Com	MUST BE REGISTERED W	(NEW CONTRACTOR) ITH THE TOWN AS A CONTRACTOR ility Under Terms of Permit:
Print Name of	Qualifier/Authorized Agent:	
Complete Add	ess of Assuming Party:	
		mail address:
Signature of A	bove:	Date:
	NO	TARY SECTION
STATE OF FLO COUNTY OF	RIDA	
		e me by means of
Notary's Signat	ture:	
☐ Personally k	nown or Type of Identificatio	on Produced:

Section C (Property Owner)

I, the Owner, acknowledge that the previous contractor was removed from the permit number listed above and, I, the Owner, shall assume full responsibility for the work completed by the previous contractor and hold the Town of Haverhill, its agents, employees, and elected officers harmless and without liability for the removal of my previous contractor and any before, during, or after, such removal. At the time the contractor relinquishes the permit I, the owner, shall assume total responsibility for the work completed to that date and hold the Town harmless.

I understand that if a separate Notice of Commencement was filed under the name of the contractor being changed, a certified copy of the new Notice of Commencement must be submitted to the Building Department before the work may continue.

Property Owner's Signature: _		Date:					
	NOTARY SECTION						
STATE OF FLORIDA COUNTY OF							
Sworn to (or affirmed) and sub notarization on this	scribed before me by means of [day of, 2	☐ physical presence or					
Notary's Signature:							
Personally known or Type of Identification Produced:							
Building Department Use Only:							
Paid: \$cash	check # Date Paid	:					
Building Official:	Date:						

Instructions: Property Owner to submit letter if original contractor does not sign change of contractor form.

(Date)

John Smith, Building Official Town of Haverhill 4585 Charlotte Street Haverhill, FL 33417

Re: Change of Contractor

Permit Number:

Permit Address:

Dear Mr. Smith,

I hereby request that you authorize and approve my request for a change of contractor without the consenting signature of the original contractor. I wish to change contractors because (list reasons here)

I hereby agree to indemnify and hold harmless the Town of Haverhill against all loss, claims, suits, or demands made by the original contractor including costs and attorney's fees the Town may incur by reason of granting this request.

Sincerely,

(Property owner signature here)

(Witness signature here)

Witness	my hand and sea	al before me by means of	_ physical presence or _	online notarization,
this	day of	, 20	_•	

Notary

Stamp

Witness

(Notary signature here)

Personally Known or ____ Type of Identification Produced: _____

