



**City of Coral Gables
Development Services Department**

**CHANGE OF CONTRACTOR,
ARCHITECT OR ENGINEER FORM**

As the legal owner of property located at: _____

I request a change of Architect, Contractor or Engineer for permit #: _____

issued to (name of previous Architect, Contractor or Engineer) _____

with a mailing address of: _____ on

date _____ for the proposed work:

Status of permit: in process Active Expired

I no longer authorize the previous Architect, Contractor or Engineer to proceed with the work covered by the plans/permit. I hereby as owner-builder, or authorized new Architect, Contractor or Engineer :
_____ to apply for such permits or complete the construction on subject property.

Note: for change of Architect and/or Engineer provide a release from the previous Architect or Engineer to this form.

If permit is issued and active

I agree to hold City of Coral Gables, its agents and authorized personnel harmless and relieve them from any responsibility or liability for any legal action or damage, cost or expense (including attorney's fee) resulting from the cancellation of the existing permit and/or the issuance of a new permit. I furthermore assume responsibility for the correction, if required, of work performed under the permit for which I am requesting cancellation. In the event there has been a change of ownership of the property, the new owner assumes the responsibility for notifying the previous owner of his or her intent to transfer the permit.

Owner:

Prime Contractor (if change of Sub-Contractor or change of qualifier)

Signature: _____

Signature: _____

Print name: _____

Print name: _____

STATE OF FLORIDA)
ss
COUNTY OF MIAMI-DADE)

STATE OF FLORIDA)
ss
COUNTY OF MIAMI-DADE)

sworn to or affirmed and subscribed before me

sworn to or affirmed and subscribed before me

this ___ day of _____, in the year 20____
by _____ who has taken an
oath and is personally known to me or has
produced _____ as
identification.

this ___ day of _____, in the year 20____
by _____ who has taken an
oath and is personally known to me or has
produced _____ as
identification.

My Commission Expires:

My Commission Expires:

Notary Public

Notary Public



**City of Coral Gables
Development Services Department**

**CHANGE OF CONTRACTOR,
WAIVER OF 10-DAY NOTIFICATION PERIOD**

Date

Re: Property located at (address and legal description)

To Whom It May Concern:

We the undersigned contractor/subcontractors have been properly notified of the change of contractor and agree to the change on permit number _____, issued to (name of permit holder)

on (date) _____ . We are aware that we can file an objection that will be part of the file.

Contractor Number _____

Qualifier Signature: _____

Print name: _____

STATE OF FLORIDA)
ss
COUNTY OF MIAMI-DADE)

Sworn to or affirmed and subscribed before me
this _____ day of _____, in the year 20 ____
by _____ who has taken an
oath and is personally known to me or has produced
_____ as identification.

My Commission Expires:

Notary Public