Hold Harmless & Change of Contractor

Notice to Owner of Property: Prior to the Building Department processing this Change of Contractor request, the property owner is required to send a letter to the contractor of record notifying him/her that they have been terminated from the job. The owner shall attach a copy of the letter along with proof of delivery (either via certified return receipt, courier, hand delivered, etc.) to this request.

ADDRESS:			
LOT:	BLOCK:	SUBDIVISI	ON:
As legal owner of	of subject property,	I request the cancell	ation of permit number (in full)
		issued to (name	of previous permit holder)
(mailing address the following rea			on (date)/ for
Date of last insp	ection/_		
as owner-builde	r, or authorize (new		eed with the work covered by the permit. I hereby apply to apply for such permits to rty.
responsibility or the cancellation the correction, if event there has	liability for any lega of the existing pern required, of work p been a change of c	al action or damage, nit or the issuance of performed under the	uthorized personnel harmless and relieve them from an cost or expense (including attorney's fee) resulting from a new permit. I furthermore assume responsibility for permit for which I am requesting cancellation. In the perty, the new owner assumes the responsibility for fer the permit.
this the	RIDA / COUNTY C day of Indersigned Notary	, 20,	Contractor of Record's Signature / Date STATE OF FLORIDA / COUNTY OF On this the day of 20, before me the Undersigned Notary Public of the State of Florida, personally appeared
And whose nam	ne(s) is/are subscrib He/she/they ackno	ared before notary) bed to the within wledge that he/she/	(Name(s) of individual(s) who appeared before notary And whose name(s) is/are subscribed to the within instrument, and He/she/they acknowledge that he/she they executed it.
	IC, STATE OF FLC		NOTARY PUBLIC, STATE OF FLORIDA
Name of Notary Commissioned	Public: Print, Stam	p, or Type as	Name of Notary Public: Print, Stamp, or Type as Commissioned
() Personally k () Produced id	known to me or, lentification		() Personally known to me or, () Produced identification
,		of ID Produced)	(Type of ID Produced)
			Accepted & Approved By:
	RIDA / COUNTY OF	BROWARD On 20 ,	Town of Golden Beach Building Dept.
this the of before me the Ur of Florida, person	ndersigned Notary F		Inspector's Signature
•	vidual(s) who appea	red before notary)	Name of Inspector/ Title
And whose name	e(s) is/are subscribe He/she/they acknow	ed to the within	Date
NOTARY PUBLI	C, STATE OF FLOI	RIDA	
Name of Notary as Commissione	Public: Print, Stamp d	, or Type	
() Personally k () Produced id			
	(Type	of ID Produced)	



TOWN OF GOLDEN BEACH

BUILDING DEPARTMENT

www.goldenbeach.us

100 Ocean Blvd. Golden Beach, FL 33160 Office: 305-932-0744 Fax: 305-933-3825

FOR OFFICE USE ONLY
Process No: Date Applied Clerk

	Master Permit	Number:	
PERMIT APPLICATION	Master	Sub- Permit	

1. Owner Information	Owner Address City ST Zip Job Address Phone No			2. CONTRACTOR INFORMATION	Qι	mpany Name ualifier Name dress No		
3. PERMIT TYPE	Building Electrical Mechanical Plumbing Landscape Roofing	4. CHANGE TO AN EXISTING PERMIT	Revision Renewal Shop Drawing Public Works	4.Type of IMPROVEMENT	Choose only One	New Construction Addition Attached Alteration Interior Alteration Exterior Repair/Replace	Roof Driveway Fence Windows Doors	Pool Gazebo-Pergola Demolition/ Partial Generator
5. Architect/ Engineer info	Address		Zip Code	. VALUE		Folio No. 19-1235 Lot(s) Block		
5. AR ENGIN	Lic. No Discipline Phone No Name E-mail Phone No			7. LEGAL/USE/WORK VALUE	Square FT Linear FT Estimated Value of the Work: Description of Work			
6.Contact Info						Description of Work		
the stand Pool Decl Owner's a The Comp should be all approp WARNIN	lards of all laws regulating construction ks, Outdoor Kitchens, Accessory Structi Affidavit: I certify that all the foregoing pletion and submission of a Building Pe e issued. The submission of inaccurate priate fines, penalties and other punish	n in this juris ures, Irrigation information ermit Applica misleading nments auth ORD A NOT	rk and/or installations as indicated. I certify that no diction. I understand that a separate permit must I no, Landscape and Landscape Lighting work and oth is accurate and that work will be done in compliar I NOTICE REGARDING B ation is a requirement of securing a Building Permi or misrepresented information in the Application so or misrepresented information in the Application so orized by law. KINDLY GOVERN YOURSELF ACCORD CE OF COMMENCMENT MAY RESULT IN YOU PAY JR NOTICE OF COMMENCEMENT.	oe secured er categorice with all JILDING PE t. The Town hall subject JINGLY.	for Electes not applica RMIT A will retain the Be	trical, Plumbing, Mechanical, Windows, mentioned. bible laws regulating construction and zon APPLICATIONS by upon the information contained in the uilding Permit to denial, suspension or re	Doors, Roofing, Site Wa ling. e Application in determ evocation, and the indiv	alls, Fencing, Driveways, Pools, Spas, ining whether a Building Permit vidual applying for the permit, to
ATION	Print Name		Owner's Signature	MATION		Print Name		Qualifer's Signature
8.Owner Information	Date	No	tary Public- State of Florida at Large	9.QUALIFIER INFORMATION		Date	Notary Pub	olic- State of Florida at Large
8.0	Notary Stamp					No	tary Stamp	

Approvals	APPROVED/DATE	T WRITE BELOW - FOR OFFICE USE O DISAPPROVED/DATE	FEE CATEGORIES:	FEES \$	
	AFFROVED, DATE	DISAFFROVED/ DATE	Permit Fee	1113 9	
Building					
Structural			Street Sweeping		
Electrical			Trash Removal		
Mechanical			Scanning		
Plumbing			Infrastructure		
Landscaping			BCCD		
Zoning			Education		
Building Dir			State Surcharge		
Publics Works			Sub-Total		
Grading / Drainage			Process Fee		
			Total Fees		