



TOWN OF OCEAN RIDGE

6450 North Ocean Boulevard, Ocean Ridge, Florida 33435
(561) 732-2635 Main ♦ (561) 737-8359 Fax
oceanridgeflorida.com ♦ permit@oceanridgeflorida.com

Change of Contractor Request Form

Permit: _____ Permit Address: _____

SECTION A (RELEASED CONTRACTOR)

Name of Contractor/Company Being Released: _____

Name of Qualified/Authorized Agent: _____

Signature of Above: _____ Date: _____

Contractor's License No. _____

NOTARY SECTION

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization on this _____ day of _____, 20_____.

Stamp/Seal

Notary's Signature: _____

Personally known or Type of Identification Produced: _____

SECTION B (NEW CONTRACTOR)

Name of Company Assuming All Responsibility Under Terms of Permit: _____

Print Name of Qualifier/Authorized Agent: _____

Complete Address of Assuming Party: _____

Signature of Above: _____ Date: _____

Contractor's License No. _____

NOTARY SECTION

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization on this _____ day of _____, 20_____.

Stamp/Seal

Notary's Signature: _____

Personally known or Type of Identification 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 Ocean Ridge, 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 subscribed before me by means of physical presence or online notarization on this _____ day of _____, 20_____.

Stamp/Seal

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)

Durrani Guy, Building Official
Town of Ocean Ridge
6450 N Ocean Blvd
Ocean Ridge, FL 33435

Re: Change of Contractor

Permit Number:

Permit Address:

Dear Mr. Guy,

SAMPLE

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 Ocean Ridge 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,

Witness

(Property owner signature here)

(Witness signature here)

Witness my hand and seal before me by means of ___ physical presence or ___ online notarization, this ___ day of _____, 20 ____.

Notary

Stamp

(Notary signature here)

___ Personally Known or ___ Type of Identification Produced: _____