



City of Pompano Beach
Department of Development Services
Building Division

100 W. Atlantic Blvd Pompano Beach, FL 33060
Phone: 954.786.4670 Fax: 954.786.4677

Change of Prime Contractor

Permit Number: _____ Date: _____

Job Address: _____ Pompano Beach, FL _____ (Zip Code)

Subdivision (If Acreage, attach legal description.) Block Lot(s)

Job Description: _____

Original Contractor: _____

Proposed New Contractor: _____

Florida Building Code
Broward County Amendments Chapter 1 - Administration

105.13.4 Upon request of the owner and/or permit holder and on investigation by the Building Official to determine that the work has been abandoned or that the contractor is unable or unwilling to complete the contract a second permit may be issued where there is a change of contractor without the initial permit being revoked or suspended.

105.13.4.1 The foregoing will be permitted only when the following stated persons have filed with the Building Official a letter stating the reason for a second permit being required and holding the Building Official harmless from legal involvement. All interested parties shall be notified before action is taken.

105.13.4.1-1 Where a prime contractor is the permit holder the owner shall both file such hold - harmless letter.

Hold Harmless

BUILDING OFFICIAL:

As legal owner of the above mentioned property, and pursuant to the Florida Building Code, Broward County Amendments Sec.

105.10.4.4, I request issuance of second permit for the referenced project, for the following reasons: _____

I HEREBY apply as owner, or authorize _____ to apply for such permits as are necessary to construct or complete the construction on referenced property.

I agree to hold the City of Pompano Beach, its officers and employees harmless and to relieve the City, its officers and employees from any responsibility or liability for any legal action or damage which may result from the issuance of a new permit.

I further acknowledge that as the owner, I am responsible for compliance with the code of any and all corrections, if required, of work performed under the prior permit.

Signature of Legal Owner/ Agent

STATE OF FLORIDA- COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this

_____ day of _____, 20 _____ by

Type/ Print Owner's Name

NOTARY as to Owner or Agent (Signature)

Name & Title

(print or Stamp) _____

Personally Know ___ OR Produced Identification _____

Type of Identification Produced _____