



*City of Brooksville
 Building Division
 201 Howell Avenue, Brooksville, FL 34601
 Phone: 352-544-8301
 Permits@cityofbrooksville.us*

CHANGE OF PRIMARY CONTRACTOR FORM

Application / Permit Number: _____

Address of Project: _____

Name of Contractor Being Released: _____

New Contractor - Complete This Section:

Company Name of New Contractor Assuming Responsibility: _____

Address of Assuming Party: _____

Qualifiers Name: _____ License Number: _____

Signature of Qualifier: _____ Date: _____

NOTARY FOR CONTRACTOR'S SIGNATURE:

State of Florida County of Hernando

The foregoing was acknowledged before me this _____ day of _____, 20____,

By _____, who is personally known to me ____ or has produced
 _____ as identification.

 Signature of Notary NOTARY STAMP:

Owner - Complete This Section:

At the time the previous contractor is removed from the permit, I, the Owner, shall assume total responsibility for the work completed to that date and hold the City of Brooksville harmless and without liability. I understand that a Change of Contractor fee will apply for this change if the permit has already been issued, and will obtain any additional permits as are necessary to complete the construction on subject property.

Signature of Owner: _____ Date: _____

NOTARY FOR OWNER'S SIGNATURE:

State of Florida County of Hernando

The foregoing was acknowledged before me this _____ day of _____, 20____

By _____, who is personally known to me ____ or produced
 _____ as identification.

 Signature of Notary NOTARY STAMP:

There is a \$125.00 fee associated with this change.