VILLAGE OF KEY BISCAYNE

Department of Building, Zoning and Planning

88 West McIntyre St., Suite 250 **Key Biscayne, FL 33149**
Phone (305) 365-5512 **Fax (305) 365-5556**

www.keybiscayne.fl.gov

Mission Statement: "TO PROVIDE A SAFE, QUALITY ENVIRONMENT FOR ALL ISLANDERS THROUGH RESPONSIBLE GOVERNMENT"

HOLD HARMLESS LETTER

Owner's Name: _____ Date: ____ /____ /____
Property Address: _____
Legal Description: _____

To Whom It May Concern:
As legal owner of subject property, I request the cancellation of Permit Number (In full) _____ issued to (Name of previous permit holder) _____ of (Mailing address) _____ on (Date) ____ /____ /____ for the following reason: _____
_____

Date of Last Inspection: ____ /____ /____

I hereby apply as owner-builder, or authorize (new Contractor) _____ to apply for such additional permits as are necessary to construct or complete the construction on subject property.

I agree to hold the VILLAGE OF KEY BISCAYNE, 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 fees) resulting from the cancellation of the existing permit 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 of notifying the previous owner of his or her intent to transfer the permit.

Very truly yours,

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

_____
(Owner)

The undersigned, being first duly sworn, deposes and says that she / he is the legal owner of the above property.
Sworn to and subscribed before me this _____ day of _____, 20_____.

Personally known to me _____
Produced Identification _____

_____
Notary Public/State of Florida
(Print, type or stamp commissioned name of Notary Public)

Type of Identification _____

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

PRIME CONTRACTOR (Only if the Subcontractor holds the permit or there is a change of qualifier)

_____

The undersigned, being first duly sworn, deposes and says that she / he is the legal owner of the above property.
Sworn to and subscribed before me this _____ day of _____, 20_____.

Personally known to me _____
Produced Identification _____

_____
Notary Public/State of Florida
(Print, type or stamp commissioned name of Notary Public)

Type of Identification _____