



VILLAGE OF KEY BISCAYNE

Department of Building, Zoning and Planning

88 West McIntyre St., Suite 250
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Key Biscayne, FL 33149
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www.keybiscayne.fl.gov

CHANGE OF CONTRACTOR REQUEST

Instructions:

1. Complete this Change of Contractor Request form that must be signed by the permit applicant and the existing qualifier. Both signatures must be notarized. Please print clearly or type the information.
2. Submit this completed form and a new permit application containing the new contractor information.

Date: _____ Folio No.: 24- _____ Permit No.: _____

Job Address: _____ Unit No.: _____

Owner/Tenant Information		Existing Contractor Information	
Name:		Company Name:	
Address:		Address:	
City:		City:	
State:	Zip Code:	State:	Zip Code:
Phone No.:		Qualifier Name:	
Email:		License No.:	Phone No.:

Reason for Change of Contractor: _____ Has any work commenced? Yes _____ No _____

Hold Harmless: I (We) 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 change of contractor. I furthermore assume responsibility for the work being performed under this permit for which I am requesting a change of contractor. 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.

The undersigned, being first duly sworn, deposes and says that she / he is the legal owner of the above property.

X _____
 Signature of Owner/Tenant
 STATE OF FLORIDA, COUNTY OF MIAMI-DADE
 Sworn to and subscribed before me this _____ day of _____, 20__.
 By (Print Name) _____

Notary Name _____
 Personally known _____ or I.D. _____

Signature of the existing qualifier provides consent to waive the standard 10-day notification waiting period.

X _____
 Signature of Existing Qualifier (Master Permit)
 STATE OF FLORIDA, COUNTY OF MIAMI-DADE
 Sworn to and subscribed before me this _____ day of _____, 20__.
 By (Print Name) _____

Notary Name _____
 Personally known _____ or I.D. _____

Approved for Change of Contractor: _____ / _____ / 20__

Cost: \$115.00

Eugenio M. Santiago, P.E., CFM
Building Official