



CITY OF OKEECHOBEE
BUILDING DEPARTMENT
55 SE THIRD AVENUE
OKEECHOBEE, FL 34974
Tele: 863-763-9821 Fax: 863-763-1686

CHANGE IN CONTRACTOR

DATE _____ PERMIT # _____

OWNER'S NAME _____

TELEPHONE # _____ EMAIL: _____

PROJECT ADDRESS _____

ORIGINAL CONTRACTOR _____

LICENSE # _____

NEW CONTRACTOR _____

LICENSE # _____

PHONE # _____ EMAIL: _____

REASON(S) FOR CHANGE OF CONTRACTOR _____

Please check one of the following:

- () Attached release letter, signed & dated, from original contractor relinquishing all plans, documents, fees, if applicable, to the new contractor.
- () The original contractor will not release any documents.

Signature of Owner _____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this _____ day of _____, 20 _____,

by _____, (name of person)

Personally known OR produced identification

Type of Identification Produced:

Signature of Notary

(seal)