



CITY OF MADEIRA BEACH  
 300 MUNICIPAL DRIVE • MADEIRA BEACH, FLORIDA 33708  
 PHONE (727) 391-9951 • FAX (727) 395-9361  
[www.madeirabeachfl.gov](http://www.madeirabeachfl.gov)



## CHANGE OF CONTRACTOR FORM

Application/Permit #: \_\_\_\_\_

Address of Project: \_\_\_\_\_

Name of Contractor being released: \_\_\_\_\_ as of \_\_\_\_\_

### NEW CONTRACTOR – COMPLETE FOLLOWING SECTION:

Name of New Contractor assuming responsibility: \_\_\_\_\_

Address of assuming party: \_\_\_\_\_

Qualifier's Name: \_\_\_\_\_ License #: \_\_\_\_\_

Qualifier's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF FLORIDA  
 COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

by \_\_\_\_\_  
*(Name of person acknowledged)*

\_\_\_\_\_  
*(Signature of Notary Public)*

Personally known \_\_\_\_\_ OR Produced Identification: \_\_\_\_\_  
 Type of Identification: \_\_\_\_\_

### OWNER – COMPLETE THE FOLLOWING SECTION:

I, the Owner, acknowledge that the previous contractor was removed from the permit number listed above and I, the Owner, shall assume full responsibility for the work completed by the previous contractor and hold the City of Madeira Beach, its agents, employees, and elected officials harmless and without liability for the removal of my previous contractor and any work performed before, during, or after such removal. **I understand that a Change of Contractor fee will apply for this change if the permit has already been issued, and that any sub-permits which may exist at this time must be re-applied for in order to move forward.**

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF FLORIDA  
 COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

by \_\_\_\_\_  
*(Name of person acknowledged)*

\_\_\_\_\_  
*(Signature of Notary Public)*

Personally known \_\_\_\_\_ OR Produced Identification: \_\_\_\_\_  
 Type of Identification: \_\_\_\_\_