

## **CHANGE OF CONTRACTOR**

Permit #	Project Address
Name of Property Owner	Phone #:
Original Contractor	
New Contractor:	License #:
Company Name:	Phone #:
Contractor Address:	
Contact Person:	Email:
work and to hold the Building Official	r the above referenced permitted project, including all previously completed I and the City of Cape Coral harmless and relieve them from any responsibility damage resulting from work performed by previous contractors.
Printed Name of Contractor	
Signature of Contractor	
STATE OF (	COUNTY OF
Sworn to (or affirmed) and subscribe	d before me, by means of physical presence or online
notarization, on this day of	f 20 by
who is personally known or produced	d as identification.
	Exp Date: Commission Number:
	Signature of Notary Public:
	Printed Name of Notary Public: