



CHANGE OF CONTRACTOR

PERMIT #: _____

DATE: _____

OWNER NAME: _____

JOBSITE ADDRESS: _____

ORIGINAL
CONTRACTOR: _____

LICENSE #: _____

NEW
CONTRACTOR: _____

LICENSE #: _____

REASON FOR CHANGE: _____

The undersigned agrees to indemnify, hold harmless, and defend the City of Margate, its agents and employees, from and against any cause arising out of this Change of Contractor through the act, error, omission or negligent act of the undersigned or his agents or employees, or through any act, error, omission or negligent act for which the City of Margate or its agents or employees are alleged to be liable.

I affirm that all interested parties have been notified regarding this change of contractor.

PROPERTY OWNER: _____
Print Name

SIGNATURE: _____
Signature

State of Florida
County of _____

The foregoing instrument was acknowledged before me **by means of** **physical presence** or **online notarization**, this _____ day of _____, 20____(year), by _____ (name of person acknowledging), and is personally known to me or has produced identification.

NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires: