



CITY OF HOMESTEAD DEVELOPMENT SERVICES
 790 N HOMESTEAD BLVD.
 HOMESTEAD, FL 33030
 TEL. 305-224-4500
 FAX. 305-224-4539

**HOLD HARMLESS
 CHANGE OF CONTRACTOR**

ATTENTION: Development Services Department

RE: Property located at: _____.

As legal owner of subject property, I request the cancellation of permit # _____, issued to (name of contractor) _____ (address) _____ on date _____.

I hereby apply as owner/builder, or authorized (new contractor) _____. To apply for such permits as necessary to construct or complete the construction on said property.

I agree to hold harmless the City of Homestead, its agents and authorized personnel harmless and relieve them from responsibility or liability for any legal action or damage, cost expense (Including attorney's fee) resulting from the cancellation of the existing permit or the issuance of a new permit. I furthermore assume responsibility for the correction, if required, of work under the permit for which I am requesting cancellation.

 Legal Owner's Signature

 Notary Public State of Florida, Sworn to & subscribe before me this ____ day of _____, _____.

 General Contractor Signature

 Notary Public State of Florida, Sworn to & subscribe before me this ____ day of _____, _____.

 Releasing Permit Holder Signature

 Notary Public State of Florida, Sworn to & subscribe before me this ____ day of _____, _____.

 Incoming Permit Holder Signature

 Notary Public State of Florida, Sworn to & subscribe before me this ____ day of _____, _____.

CERTIFIED LETTER SENT: _____

CERTIFICATION #: _____