

UNIVERSITY OF FLORIDA CHANGE OF ARCHITECT, CONTRACTOR, OR ENGINEER APPLICATION

- Permit#:
- SUBMIT Completed application to codes@ehs.ufl.edu.

As the legal owner or owner's authorized agent of property located at:			
Address	City	Zip,	
I request a change of Architect Engineer Primary Contractor, or Sub-contractor for			
permit #: I no longer authorize the previous Architect, Engineer, Primary Contractor, or Sub-			
Contractor to proceed with the work covered by the plans/permit. I hereby as owner or owner's authorized agent, authorized new			
Architect, Engineer or Primary Contractor, or Sub-contractor			
(name of firm):		, with	
mailing address of: Address	City		
State Zip with Florida License	e Number of	to	
complete the construction or design on subject property.			

Note: for change of Architect and/or Engineer attach a release letter from the previous Architect or Engineer to this Application.

Applicant Statement

I agree to hold UF EH&S, its agents, and authorized personnel harmless and relieve them from any responsibility or liability for any legal action or damage, cost or expense (including attorney's fee) resulting from the changes made to the existing permit and/or the issuance of a new permit. I furthermore assume responsibility for the correction(s), if required, of work performed under the permit for which I am requesting to be modified.

Owner or Owner's Agent:	Primary Contractor (if change of Sub-Contractor or Qualifier)
Printed Name:	Printed Name:
Signature:	Signature:
STATE of	STATE of
County of; Sworn to (or	
affirmed) and subscribed before me on thisday of, 20	affirmed) and subscribed before me on thisday of, 20
by, (printed	by, (printed
name of owner or owner's agent) that is 🗌 personally known by	name of owner or owner's agent) that is 🗌 personally known by
me or has produced	me or has produced
as identification.	as identification.
Notary Signature:	Notary Signature: