

**CONTRACTOR/SUBCONTRACTOR CHANGE FORM**

This form is to advise the City of Jacksonville Planning & Permitting office that the original contractor listed on the permit referenced below has been replaced and to request that the permit be amended to reflect this change. This is also to advise the City that the new contractor, who has signed below, is in agreement to assume all responsibility for any portion of the project that may have been installed by the original contractor. **Please complete one form for each permit.**

Building Permit #: \_\_\_\_\_

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

Name of Original Contractor: \_\_\_\_\_

Name of New Contractor: \_\_\_\_\_

State Contractor License Number: \_\_\_\_\_

New Contractor Address: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner/Tenant: \_\_\_\_\_

Address: \_\_\_\_\_

**SIGNATURE OF CONTRACTOR:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_

Office Use Only

The request to amend the above referenced permit was approved on \_\_\_\_\_  
\_\_\_\_\_ by \_\_\_\_\_. Completion of this form constitutes  
amendment of the permit.