



**TOWN OF SURFSIDE
BUILDING DEPARTMENT**

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863
Facsimile: 305 861-1302

Internet: www.townofsurfsidefl.gov

**CHANGE OF PRIME CONTRACTOR
HOLD HARMLESS FORM**

DATE: _____

TO: Town of Surfside
Building Department
9293 Harding Avenue
Surfside, FL 33154

RE Property Located at: _____
Block(s) _____ Lot(s) _____ Sub-Division(s) _____
Owner: _____

PRIME CONTRACTOR SECTION:

As Prime Contractor for the subject Property listed above, I request the cancellation of Permit # _____
issued to _____ on _____

For the following reasons: _____

I agree to hold the Building official, the Town of Surfside, its agents and authorized personnel harmless and relieve it from any responsibility or liability for any legal action or damage 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 performed under the permit for which I am requesting cancellation.

Prime Contractor Name Signature

State of Florida, County of Miami-Dade
Sworn to and subscribed before me this _____ day of _____, 20____ by: _____
who is Personally Known or produced _____ as Identification.

(Notary Seal) _____
Notary Public
Commission Expires: _____

OWNER SECTION:

I, _____ certify that I am the legal owner of the property
described above and authorize _____ (New contractor)
To apply for such permits as are necessary to construct or complete the construction on subject property.

Owner Name Signature

State of Florida, County of Miami-Dade
Sworn to and subscribed before me this _____ day of _____, 20____ by: _____
who is Personally Known or produced _____ as Identification.

(Notary Seal) _____
Notary Public
Commission Expires: _____