

TOWN OF SURFSIDE

Building Department 9293 Harding Avenue Surfside, FL 33154 Tel: (305) 861-4863 Fax: (305) 861-1302 www.townofsurfsidefl.gov Email: buildingapp@townofsurfsidefl.gov

Change of Architect / Engineer - Hold Harmless

	JOD Address:			
Owner's Name:	Owner's Address:			
Owner's Phone No:	_City & ZipCode:			
Owner's E-mail:				
CURRENT ARCHITECT/ENGINEER OF RECORD	D INFORMATION:			
Name:	Address:			
License No	City & Zip Code:	_City & Zip Code:		
Phone No:	E-mail:			
NEW ARCHITECT/ENGINEER OF RECORD INF	ORMATION:			
Name:	Address:	_Address:		
License No.	City & ZipCode:	_City & ZipCode:		
Phone No:	E-mail:			
Partial inspections performed by Architect/Engineer	of record () YES, Date:	() NO		
I agree to hold the Town of Surfside, its agents and responsibility or liability for any legal action or dama resulting from substituting the design professional. work performed under the permit for which I am red has been a change of ownership of the property, th owner of his and/or her intent to substitute the desi comply with the requirements of Engineers Chapte	age, cost or expense, including but no I furthermore assume responsibility fo questing substitution of the design pro ne new owner assumes the responsibi gn professional. I am also certifying th	t limited to attorney's fees r corrections, if required, o fessional. In the event ther lity for notifying the previou at I understand and fully		
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Type of Identification produced ____

Type of Identification	produced	

(SEAL) _____