



**TOWN OF SURFSIDE  
BUILDING DEPARTMENT**

9293 HARDING AVENUE  
SURFSIDE, FL 33154  
TEL: (305) 861-4863  
FAX: (305) 861-1302  
www.townofsurfsidefl.gov

**HOLD HARMLESS**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Re: Property located at (address and legal description) \_\_\_\_\_

As legal owner of subject property, I request the cancellation of permit number (in full) \_\_\_\_\_, issued to (name of previous permit holder) \_\_\_\_\_ (mailing address) \_\_\_\_\_ on (date) \_\_\_\_/\_\_\_\_/\_\_\_\_ for the following reason \_\_\_\_\_

Date of last inspection \_\_\_\_/\_\_\_\_/\_\_\_\_

I no longer authorize the previous permit holder to proceed with the work covered by the permit. I hereby apply as owner-builder, or authorize (new contractor) \_\_\_\_\_ to apply for such permits to construct or complete the construction on subject property.

I agree to hold Town of Surfside, its agents and authorized personnel (including the Building Official) 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 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. In the event there has been a change of ownership of the property, the new owner assumes the responsibility for notifying the previous owner of his or her intent to transfer the permit.

Very truly yours,

**OWNER**

**PRIME CONTRACTOR** (only if Sub-Contractor holds the permit or if there is a change of qualifier)

**STATE OF FLORIDA  
COUNTY OF MIAMI-DADE:**

The person whose signature appears above, deposes that he/she is the legal owner of the above property.

**SWORN TO AND SUBSCRIBED**

before me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

by \_\_\_\_\_

**SEAL)** \_\_\_\_\_

PRINT, TYPE OR STAMP NAME OF NOTARY

Personally known \_\_\_\_\_  
or Produced Identification \_\_\_\_\_  
Type of Identification produced \_\_\_\_\_

**STATE OF FLORIDA  
COUNTY OF MIAMI-DADE:**

The person whose signature appears above, deposes that he/she is the Prime Contractor for the above.

**SWORN TO AND SUBSCRIBED**

before me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

by \_\_\_\_\_

**SEAL)** \_\_\_\_\_

PRINT, TYPE OR STAMP NAME OF NOTARY

Personally known \_\_\_\_\_  
or Produced Identification \_\_\_\_\_  
Type of Identification produced \_\_\_\_\_

**\*\*\*DEPARTMENT USE ONLY\*\*\***

**Note:** Hold Harmless letter must be signed by the owner of the property and the General Contractor in case of subsidiary permits or change of qualifier.

Date Issued (original): \_\_\_\_/\_\_\_\_/\_\_\_\_ Change Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Fee: \_\_\_\_\_ Last Valid Inspection: \_\_\_\_/\_\_\_\_/\_\_\_\_