

HOLD HARMLESS

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

	Date:/		
Re: Property located at (address and legal description)			
As legal owner of subject property, I request the cancellation of p	permit number (in full), issued to (name of		
previous permit holder)	(mailing address)		
on (date)/ for the following reason			
Date of last inspection/			
	with the work covered by the permit. I hereby apply as owner-builder, o to apply for such permits to construct or complete the		
responsibility or liability for any legal action or damage, cost existing permit or the issuance of a new permit. I furthermor under the permit for which I am requesting cancellation. In owner assumes the responsibility for notifying the previous own 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:	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.	The person whose signature appears above, deposes that he/she is the Prime Contractor for the above.		
SWORN TO AND SUBSCRIBED	SWORN TO AND SUBSCRIBED		
before me this day of, 20	before me this day of, 20		
by	by		
SEAL)	- CEAL)		
PRINT, TYPE OR STAMP NAME OF NOTARY	PRINT, TYPE OR STAMP NAME OF NOTARY		
Personally knownor Produced Identification	Personally known or Produced Identification		
Type of Identification produced	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:	/ / -	Last Valid Inspection: /	/
Date Issued (Original):	/ / Change Date:	/ / Fee.	Last Valid Inspection: /	/