



Clay County Building Department
477 Houston Street 3rd Floor
P.O. Box 1366
Green Cove Springs, FL 32043
Phone: 904-284-6307 Option 4

Request for Change of Contractor

Please submit this form via email or upload into the permitting portal. Email: permits@claycountygov.com

Permit #: _____

Property Address: _____

Owner: _____ Phone: _____ Email: _____

Original Contractor: _____ Phone: _____ Email: _____ License: _____

New Contractor: _____ Phone: _____ Email: _____ License: _____

Have any work/inspections been completed by the Original Contractor? Yes No

If yes, please indicate where the Original Contractor stopped and where the New Contractor will begin.

Request must be signed by the New Contractor and the Owner and must be notarized. By signing below, the New Contractor acknowledges that they will be taking over responsibility of the current permit and will not be held responsible for any work completed beforehand, unless otherwise agreed upon.

Signature of New License Holder

Print Name

Date

Signature of Owner

Print Name

Date

Sworn to and subscribed before me this _____ day of _____ A.D. 20 _____

Personally known _____ or produced identification.

Type of identification produced _____ and number: _____

Signature of Notary

Date

SEAL