



Calvin, Giordano & Associates, Inc.
EXCEPTIONAL SOLUTIONS™

Pembroke Pines Building Department
601 City Center Way | Pembroke Pines | FL
33025 Tel #954-435-6502 | Fax #954-435-6749

CHANGE OF SUB-CONTRACTOR FORM

Application / Permit Number: _____

Address of Project: _____

Name of Contractor Being Released: _____

NEW SUB-CONTRACTOR'S INFORMATION:

Name of New Contractor Assuming Responsibility: _____

Address of Assuming Party: _____

Qualifier's Name: _____ License Number: _____

At the time the previous sub-contractor was removed from the permit, I, the Primary Contractor (CGC, RC, CFC, CMC etc.), shall assume total responsibility for the work completed to that date and hold the City harmless and without liability. **105.6.4.1.**

Please Note: A new building permit application with the new sub-contractor's information must be included with the submittal of this form. There is a \$55.07 change of contractor processing fee, due at the time of Drop-Off.

(Signature of Prime Contractor's Qualifier)

(Property Owner/Agent Signature)

(Print Name)

(Print Name)

Sworn to (or affirmed) and subscribed before me this
_____ day of _____, 20_____.

Sworn to (or affirmed) and subscribed before me this
_____ day of _____, 20_____.

Signature: _____

Signature: _____

Personally known: _____ Identification provided: _____

Personally known: _____ Identification provided: _____