



City of Maitland
1776 Independence Lane
Maitland, Florida 32751

Phone: 407-539-6150
Fax: 407-539-6275
Email: Digitalplan@itsmymaitland.com

CHANGE OF CONTRACTOR OR SUBCONTACTOR

I. Identification

Permit Number: _____ Job Site Address: _____
Owner in Fee Name: _____
Owner in Fee Address: _____ State: _____ Zip: _____
Owner Telephone: _____ Owner Email: _____
Licensee Name: _____ License Number: _____

II. Current Contractor

Date Concluding: _____

Business Name: _____
Licensee Name: _____ License Number: _____
Address: _____ State: _____ Zip: _____
Telephone: _____ Email: _____

III. Proposed Contractor

Date Commencing: _____

Business Name: _____
Licensee Name: _____ License Number: _____
Address: _____ State: _____ Zip: _____
Telephone: _____ Email: _____

IV. Affirmation

This instrument is for the purpose of advising all concerned that the person(s) whose signature appears below will hold the City of Maitland and the Building Official of the City of Maitland harmless because of this Change of Contractor. The undersigned agrees to indemnify and hold harmless and defend the City of Maitland, its agents, servants, and employees from and against any claim arising out of the Change of Contractor through any act, error, omission or negligent act of the undersigned, It's or his agents, servants or employees or any act, error, omission or negligent act for which the City of Maitland or its agents, servants or employees are alleged to be liable.

Signature of Property Owner (Required)

Date

Signature of General Contractor (Required for Change of Sub-Contractor)

Date

Print Name of General Contractor

STATE OF FLORIDA, COUNTY OF ORANGE, sworn to (or affirmed) and
subscribed to me by means of physical presence or online
notarization, this _____ day of _____, 20 _____

(Seal)

Signature of Notary

Print, Type, or Stamp Name of Notary

Personally known, or Produced Identification

Type of Identification Produced _____