



CHANGE OF CONTRACTOR WAIVER OF 10-DAY NOTIFICATION PERIOD

Date ____/____/____

Re: Property located at (address and legal description) _____

To Whom It May Concern:

We the undersigned subcontractors have been properly notified of the change of contractor and agree to the change on permit number _____, issued to (name of permit holder) _____ on (date) ____/____/____. We are aware that we can file an objection that will be part of the file.

Subsidiary Permit Number (s): _____
Permit Type: _____ Category(s) _____
Contractor Number _____
Qualifier Signature _____
Print Name _____

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Permit Type: _____ Category(s) _____
Contractor Number _____
Qualifier Signature _____
Print Name _____

STATE OF FLORIDA, COUNTY OF MIAMI-DADE:

Sworn to and subscribed before me by means of

physical presence OR online notarizations

this _____ day of _____, 20____,

by _____

Signature of Notary Public _____

Print Name _____

(SEAL)

Personally known _____

or Produced Identification _____

Type of Identification Produced _____

STATE OF FLORIDA, COUNTY OF MIAMI-DADE:

Sworn to and subscribed before me by means of

physical presence OR online notarizations

this _____ day of _____, 20____,

by _____

Signature of Notary Public _____

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(SEAL)

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