

City of Maitland  
1776 Independence Lane  
Maitland, Florida 32751



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## **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

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**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 \_\_\_\_\_